

# REPORT

## **"A STUDY OF THE MISUSE OF DRUGS AMONG SECONDARY SCHOOL CHILDREN IN THE STATE OF KELANTAN"**

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LAPURAN  
"KAJIAN PENGGUNAAN DADAH DI KALANGAN  
PELAJAR-PELAJAR SEKOLAH MENENGAH  
NEGERI KELANTAN"

oleh

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# ACKNOWLEDGEMENTS

This study could not have been completed without the assistance of many persons, of whom only some have been mentioned here:

- (1) Y.A.B. Dato Seri (Dr.) Mahathir bin Mohamad, Deputy Prime Minister and Chairman of the Cabinet Committee on Drug Abuse Control, for his support.
- (2) Y.B. Dato Seri Musa Hitam, Minister of Education, for his continued interest and support.
- (3) Y.B. Dato Rais Yatim, Menteri Besar Negeri Sembilan and Chairman of the National Action Unit of the Cabinet Committee on Drug Abuse Control for his guidance and continued support.
- (4) Y.B. Tan Sri Datuk Haji Hamdan bin Sheikh Tahir, Vice-Chancellor, Universiti Sains Malaysia, for his leadership and guidance.
- (5) Y.B. Dato Haji Murad bin Mohd. Noor, Director-General of Education for his advice and support.
- (6) Professor K.J. Ratnam and Associate Professor Musa Mohamad, for their assistance and continued guidance of the project.
- (7) The Chief Education Officer Kelantan and his staff for their co-operation.
- (8) The staff of the National Drug Dependence Research Project, in particular Cik Zurina Ismail, Cik Mazlifah Ismail and Encik Gary Toh for the production of this monograph.
- (9) Cik Ong Ai Hwa for her assistance in the preparation of the tables and supervising the data collections.
- (10) To our numerous colleagues and friends especially Dr. Wan Ismail bin Wan Mahmood, for the numerous hours they have given in discussing the many aspects of this study.
- (11) Lastly but not least, to the Kelantan school children who answered the questionnaire with honesty, we remain indebted.

## CHAPTER ONE

### Introduction

Adolescent drug abuse in Malaysia - a phenomenon of the late 1960's and the 1970's - has been the cause of considerable public concern and discussion but, until recently, much of the discussion was necessarily founded upon speculation, for there was little systematic collecting of information on the extent and nature of the problem. In 1975, the Drug Abuse Research Group was formed in the Universiti Sains Malaysia; and its first research projects included, in addition to studies of known adult drug user populations, a representative sample-survey of the Secondary School population of two states, Penang and Selangor, to ascertain the level of drug abuse within the sample. The findings of this study were published in the Monograph Series of the Centre for Policy Research at Universiti Sains, under the title:

"A study of the misuse of drugs among Secondary School children in the states of Penang and Selangor", (C. P. Spencer and V. Navaratnam, 1976).

The present report, on drug abuse among secondary school children in Kelantan, is explicitly a follow-up and comparative study and should preferably be read in conjunction with the earlier monograph, in which the background literature on adolescent drug abuse is discussed at some length, together with an account of the methodology and analysis employed in these surveys. Only a summary version of this information is included in the present report.

The reasons for conducting the adolescent study on the East-Coast are the same as for the original West Coast Study: they are to investigate the extent and nature of illicit drug taking amongst Malaysian Secondary School children; and to compare the drug using individuals against their non drug using contemporaries in terms of their social background, educational aspirations and performance, social relationships, general attitudes and value system, self concepts, and their knowledge of and attitude towards drugs and drug taking.

The West-Coast study has describe the pattern of drug use and the characteristics of youthful drug users in two states where it was believed that the drug problem was most of concern (although the Drug Abuse Monitoring System at Universiti Sains Malaysia established since the West Coast Study has now shown that the problem is of comparable extent in most states). Some differences between the two states, Penang and Selangor were of interest, and are discussed in the previous monograph; but there was overall a striking similarity of findings in both states, which not only serves as an internal cross-validation of the results, but also suggests that the data from both states can be taken together to represent the West Coast of the peninsula, to compare with the situation on the East Coast. Penang and Selangor (including Kuala Lumpur, for the purposes of the survey) together with the other West Coast states, have social, demographic, cultural and economic characteristics which differentiate them from the states on the East Coast; and which therefore would, of themselves suggest the importance of comparing East with West Coast. However, it is known (from seizure records, and from the monitoring study) that the drug market situation on the East Coast and particularly in Kelantan - differs markedly from Penang and Selangor. Geographical position and different supply routes combined with local cultural traditions in drug use - which are nowhere systematically documented, but widely acknowledged - together mean that the adolescent in Kelantan is at the focus of a somewhat different set of forces than act upon the West Coast adolescent to influence his attitudes towards drugs and drug taking - and hence his likelihood of experiencing such drugs. The earlier monograph, in common with most other studies of youthful drug abuse, showed how a wide range of individuals come to be drug users -- the habit is not confined to particular groups or types of individual -- and that when explaining how some individuals came to adopt the habit and others not, much importance must be attached to the social contacts the individual has, and the general attitudes towards life that he holds; as well as the basic availability of drug substances in his immediate area. (It was suggested that if market forces and supply patterns were to change, most individuals would in fact accommodate to such changes: the particular drug types not being especially important factors in the initiation process).

Thus variations in social, cultural and drug availability factors between states would be likely to produce important variations in the patterns of drug abuse consequent upon them; and it was for this reason that the West Coast Study was re-run, with only minor modifications, in the Secondary Schools of Kelantan.

The literature on drug abuse in Malaysia has not been extensive, and there is no systematic data as yet on patterns of usage, regional variations, etc., throughout the country, although the National Monitoring Scheme is beginning to provide a baseline. There is, however, a very large literature on drug abuse in other parts of the world, much of which has been generated by the enormous upsurge in drug taking amongst youth since the middle and late 1960's. Some writers have likened this to an epidemic, and have found it useful to extend the comparison in their analysis of the origins and spread of the habit, as well as the characteristics of the "at risk" population. Other studies have developed sociological and psychological models of drug abuse emphasizing social conditions and or personality characteristics as their main explanatory variables. The review of this literature in the West Coast study monograph concluded with the view that: "As with all other social problems, it is necessary to think in terms of multiple causation of drug abuse behaviour: no single cause is to be found. It takes a combination of factors and not necessarily at all the same combination of factors in each case - to produce the behaviour. In some measure, most of the following will be involved: access to drugs; the example of others; demonstration of techniques of usage; knowledge in the sub-culture of the effects of a drug; a range of personal factors; and a range of social factors (Spencer and Navaratnam 1976).

This point of view was borne out by analysis of the findings of the Penang and Selangor surveys. Although experience of drugs was found to be confined to approximately ten percent of secondary school children, there are indications that the proportion of individuals who have experienced drugs has been growing in recent years; that the age of initiation has in some few cases been as young as ten years of age; that a number of individuals while in school have tried as many as five types of drug, and a small number have moved from experimental to regular or even heavy use; that a wide range of drug substances are easily and cheaply available locally -- and known

to be easy to obtain by many drug using school children in the survey; that amongst the non drug users there is a proportion who express curiosity and interest in trying drugs; and that the majority of the age group appear to be very ignorant of the nature and properties of drug substances.

Given that experimental of regular drug use was found in one in ten Secondary School children in Penang and Selangor, the study then proceeded to ask what characteristics differentiated these users from their non-user contemporaries. Social background characteristics were found not to be indicative of drug user status: that is to say that drug use was found fairly evenly distributed among all the social classes (as measured by parental occupation) and is not limited or even predominating in a particular social group. Religion or ethnicity, too, is a poor indicator of being at risk with relation to drug taking, although local groups of particular religious groups may well be over or under-represented among the drug taking sub-sample. This latter finding, together with much evidence about drug users' relations with their friendship groups, indicate the importance of local acquaintanceship networks for transmitting the drug habits (and indeed for setting particular drug fashions, such that the drugs of choice among the younger age group, for example, are interestingly divergent from those used by older drug users). But by no means a majority of individuals in a locality's ethnic group, even when this a higher than average rate of drug use, have experienced drugs; and in the final analysis, discrimination between drug user and non user must come down to the level of individual differences. Aspects of these found to be predictive of drug use were the individuals's self descriptions and general attitudes towards life and the social relationships around him. Many drug users conformed to the picture presented in the world literature on adolescent illicit drug users (and indeed, adolescent cigarette smokers and alcohol drinkers): that of an individual who was seeking precocious adult status, independence of family and recognition amongst their own age group; who was unusually open to influence by his peers, and was somewhat more likely to have reduced his educational aspirations. Curiosity, the influence of friends, and a degree of adolescent rebellion, rather than any fundamental social or personal problem would thus seem to be the reasons why some adolescents have experimented with drugs in Penang and Selangor. The majority of adolescents have never tried any

illicit drugs, express no interest in doing so, hold a fairly negative view of the typical drug taker, and a strongly negative view of the practice of drug taking. They claim that, even if legal sanctions were removed, they would still be in no way tempted to experiment with substances they believe to be harmful (and they make little differentiation between drug types in terms of their likely effects); and indeed remain quite largely ignorant of the local availability of drug substances or presence in their midst of numbers of contemporaries who are drug users. But as already mentioned, there is amid this group a proportion for whom curiosity about drugs is admitted, which should serve to remind one that there is no clear differentiation between drug users and non-users. Malaysia has already witnessed an increase in the proportion of the adolescent age group classifiable as users; other countries, especially the U.S.A., have seen adolescent use of "soft drugs" move from a minority to a majority position, and become normative for some segments of the population.

Given the different cultural, economic and social patterns of the East Coast, and the presumed differences in the market availability of drugs in Kelantan especially, the present study sought to discover whether the patterns of drug use amongst school children reflected these differences, or was comparable with the patterns found on the West Coast.

#### Methodology

For comparability with the West Coast surveys, the Kelantan study used the same questionnaires as had been used in Penang and Selangor, with only minor typographical amendments. There were two versions of basically the same questionnaires: a full version of 75 items (many of which had sub-items) which was administered to Forms Four, Five and Six ("The Upper Secondary School Sample Questionnaire"); and a shorter 34-item version for Form One, Two and Three ("The Lower Secondary School Sample Questionnaire"). All 34 items of the shorter questionnaire appear either verbatim in the longer version, with the exception of a few items where the wording could afford to be more adult and complex for the older sample; or where an item in the lower version item was the equivalent of a whole series of items in the upper version. (Pilot studies before the Penang and Selangor studies

had shown that the younger children could complete fewer items within the allotted time for administration than could the older children; and it was for this reason, as well as for greater comprehensibility, that the two versions were prepared, rather than a single questionnaire for the whole age range). In some of the analyses to be reported in this monograph data from Upper and Lower Schools will be presented separately, indicating that the form of the item varied between versions; and where only Upper School data are presented (generally in a subsidiary question to a main one), then this indicates that there was no corresponding item in the shorter version.

#### Administration

The closed-ended, self-administered questionnaire was completed by the sample children under conditions of anonymity, generally gathered together in a school hall. Interactions between research assistants and respondents were kept to a minimum, instructions being printed on the questionnaire forms, together with assurances that no one could trace the responses back to them, and that no one within the School would see the completed questionnaires.

The study was conducted with the permission and assistance of the Ministry of Education, who enabled the survey team to draw up a ten percent sample of the Secondary School population of Kelantan, to be representative of all areas in the state. A total of 4,728 usable questionnaires were completed, and went forward to analysis.

#### Analysis

Responses on the questionnaire forms were coded, and punched for computer analysis. Individuals were classified into "drug user" and "non drug user" groups on the basis of consistent responses to a number of items on drug experience. Inconsistent responses were discounted, and individuals with otherwise "non-user" profiles who made an erratic "user" response were counted in with non users rather than users. Thus, for example, approximately 1.4% of the Lower Secondary sample answer on one item (see Table 9) that they had tried ganja, but on all other items relating to ganja (and to other drugs) state that they have never experienced it. It would seem the most likely explanation that

this was a "false positive response", produced in error by simple misreading of the item, and should not be taken as evidence of drug experiency by itself in the face of all other information which contradicted it. (Tables to be presented below are revised to take account of such rare presumed wrong responses).

Thus, the criteria adopted for the present (and previous) report identify as a drug user anyone who has taken any one or more of the following drugs without a medical reason: amphetamines, tranquillizers, sedatives, ganja (cannabis), heroin, morphine and opium. (Cigarette and alcohol use were only ascertained for purposes of comparison, and although drugs, are legal and thus do not count towards the designation "drug user" in the survey). For most purposes, all those who have ever experienced an illicit drug are treated together, and no differentiation is made between those who have only a few experimental experiences and those whose use is regular or heavy.

Analysis of the results was performed using the Universiti Sains Malaysia IBM 370/135 computer, which is equipped with the Statistical Packages for the Social Sciences.

## CHAPTER TWO

The present chapter presents the results of the 1977/1978 survey of the Secondary School population of Kelantan and is divided into a brief section on incidence rates - the basic statistics on drug use in the sample; a second section on the patterns of abuse found amongst the subsample who had ever experienced drugs; and a final section detailing the differences in background, aspirations and attitudes found to exist between these drug users and their non drug-using contemporaries.

### A. Incidence Rates

#### Numbers of drug users (Table 1)

Out of the total sample of 4,728 individuals, 10.4% were classifiable as "drug users" in the sense used in the earlier monograph reporting the Penang and Selangor surveys. That is, an individual would be included in the drug user sample if he or she had had any experience of an illicit drug substance, whether this use was experimental and short-lived, or was a regular habit. The large majority of individuals (89.6%) had never experienced any drug substance and will hereafter be referred to as the non drug users. A further 82 individuals, whose responses over a number of drug-use questions were inconsistent, are not included in any of the subsequent analysis which compare drug users and non users. These represent 1.7% of the total sample originally surveyed.

#### Form within school (Table 2)

Drug use is marginally more common in the Lower Secondary School (forms one, two and three) than in the Upper Secondary School (forms four, five and six), with respectively 11.0% and 9.5% having experienced drugs; but these averages mask important differences between forms. Indeed, there is a bimodal distribution, with peaks in first and in sixth forms (13.8% and 14.3% respectively) and a decided low between the two peaks in the third and fourth forms (8.8% and 5.2% respectively). By the time one performs form-by-form analysis, cell sizes came below 1,000, and single percentage differences are not significant; but the two peaks and a trough in between are a striking significant effect, resulting as they do from simultaneous surveys of school throughout the state of Kelantan, all showing the same pattern.

TABLE 1

#### NUMBER OF DRUG USERS AND NON-DRUG USERS

	No. of Respondents	No. of Drug Users	No. of Non-Drug Users
Lower Secondary	2755	304 (11.0)	2451 (89.0)
Upper Secondary	1891	180 ( 9.5)	1711 (90.5)
Total	4646	484 (10.4)	4162 (89.6)

n=4728 (Lower - 2822, Upper - 1906)

\* due to inconsistency (Individuals were either classified as Users or Non-Users, however the difference (82) were individuals who were inconsistent in their answering and could not be placed definitively in either category.)

TABLE 2

#### LOWER & UPPER BY FORM OF DRUG USERS & NON-DRUG USERS

Lower by Form:-	No. of Respondents	No. of Drug Users	No. of Non-Drug Users
1	986	136 (13.8)	850 (86.2)
2	936	95 (10.1)	843 (89.9)
3	831	73 ( 8.8)	758 (91.2)
Total	2755	304 (11.0)	2451 (89.0)
Upper by Form:-			
4	843	44 ( 5.2)	799 (94.8)
5	706	87 (12.3)	619 (87.7)
6	342	49 (14.3)	293 (85.7)
Total	1891	180 ( 9.5)	1711 (90.5)

Sex of users (Table 3)

Drug use is almost as likely to occur amongst girls as boys in the Lower School (10.3% to 11.6%); but is less common amongst girls than boys in the Upper School (6.5% to 11.4%), although, at over six percent, it can hardly be said to be absent amongst these older girls. (Note that these percentages are of the numbers of either sex in either level of school; as there is a greater drop-out rate between Lower and Upper Schools amongst girls, this means than, in actual numbers, there are many fewer older girls than older boys amongst those reporting drug experience).

Use of other drugs; cigarettes (Table 4)

Regular cigarette use amongst non drug users is uncommon. 80.8% of these have never smoked, and only 3.7% admit to any regular use of cigarettes. Drug users, especially in the older sample, were much more likely to have had some experience of cigarette; and 52.2% of the older users (but only 4.6% of younger users) were regular cigarette users, with an appreciable number in the 10-20 a day range.

Age of Initiation (Table 5)

Age of initiation for cigarette bears out the above findings, with the peak age for having one's first experience of cigarette being in the years 14, 15 and 16, amongst smokers who are and who are not users of illicit drugs.

Alcohol (Tables 6 and 7)

Alcohol has scarcely been experienced by any of the younger sample; 96.7% of the young non drug users and 92.1% of the younger drug users have never drunk any alcohol at all; and only 37 individuals (22 non drug users and 15 drug users) out of the 2,755 sample from Lower Secondary Schools report any real acquaintance with alcohol. Alcohol use, although still rare among the older sample, does begin to differentiate drug users from their non-using contemporaries: 1.9% of non drug users but as many as 17.2% of drug users have ever experienced alcohol. Although there is this difference, it should be noted that experience among both groups is still limited; and in no sense could regular alcohol use be said to characterize drug users in the sample, in the way that cigarette use can be characteristic of the older users.

TABLE 3

SEX OF DRUG USERS AND NON-DRUG USERS

Sex	No. of Respondents		No. of Drug Users		No. of Non-Drug Users	
	Lower	Upper	Lower	Upper	Lower	Upper
Male	1468	1178	171 (11.6)	134 (11.4)	1297 (88.4)	1044 (88.6)
Female	1285	712	132 (10.3)	46 (6.5)	1153 (89.7)	666 (93.5)
No Information	2	1 (50.0)	1 (50.0)	-	1 (50.0)	1 (100.0)
Total	2755	1891	304 (11.0)	180 (9.5)	2451 (89.0)	1711 (90.5)

TABLE 4

## FREQUENCY OF USAGE FOR CIGARETTES

Frequency of User	Lower Secondary		Upper Secondary		Total	
	Drug Users	Non Drug Users	Drug Users	Non Drug Users	Drug Users	Non Drug Users
Never smoked	234 (77.0)	2124(86.7)	55(30.6)	1238(72.4)	289(59.7)	3362(80.8)
Once or twice	34 (11.2)	210(8.6)	12( 6.7)	144(8.4)	46( 9.5)	354(8.5)
Once in a while	20 ( 6.6)	83( 3.4)	19(10.6)	197(11.5)	39( 8.1)	280( 6.7)
One or two a day	6 ( 2.0)	18( 0.7)	26(20.0)	91( 5.3)	42( 8.7)	109( 2.6)
Less than 20 a day	7 (2.3)	4( 0.2)	49(27.2)	36( 2.1)	56(11.6)	40(1.0)
More than 20 a day	1 ( 0.3)	-	9( 5.0)	4( 0.2)	10( 2.1)	4( 0.1)
No information	2 ( 0.7)	12( 0.5)	-	1( 0.1)	3( 0.6)	13( 0.3)
Total	304(100.0)	2451(100.0)	180(100.0)	1711(100.0)	484(100.0)	4162(100.0)
Grand total	2755		1891		4646	

TABLE 5

## AGE OF INITIATION FOR CIGARETTES

Age of Initiation	Lower Secondary		Upper Secondary		Total	
	Drug User	Non-Drug User	Drug User	Non-Drug User	Drug User	Non-Drug User
Never smoked or once, twice daily	214 (70.4)	2131 (86.9)	55 (30.6)	1194 (69.8)	269 (55.6)	3325 (80.0)
10 years or below	9 ( 3.0)	38 ( 1.6)	5 ( 2.8)	19 ( 1.1)	14 ( 2.9)	57 ( 1.4)
11 years	15 ( 4.9)	28 ( 1.1)	5 ( 2.8)	7 ( 0.4)	20 ( 4.1)	35 ( 0.8)
12 years	13 ( 4.3)	48 ( 2.0)	13 ( 7.2)	19 ( 1.1)	26 ( 5.4)	67 ( 1.6)
13 years	12 ( 3.9)	43 ( 1.8)	14 ( 7.8)	29 ( 1.7)	26 ( 5.4)	72 ( 1.7)
14 years	14 ( 4.6)	46 ( 1.9)	16 ( 8.9)	59 ( 3.4)	30 ( 6.2)	105 ( 2.5)
15 years	19 ( 6.3)	67 ( 2.7)	34 (18.9)	109 ( 6.4)	53 (11.0)	176 ( 4.2)
16 years	-	-	21 (11.7)	140 ( 8.2)	21 ( 4.3)	140 ( 3.4)
17 years	-	-	10 ( 5.6)	54 ( 3.2)	10 ( 2.1)	54 ( 1.3)
18 years	-	-	4 ( 2.2)	21 ( 1.2)	4 ( 0.8)	21 ( 0.5)
19 years	-	-	-	8 ( 0.5)	-	8 ( 0.2)
20 years	-	-	1 ( 0.6)	42 ( 2.5)	1 ( 0.2)	42 ( 1.0)
No Information	8 ( 2.6)	50 ( 2.0)	2 ( 1.1)	10 ( 0.6)	10 ( 2.1)	60 ( 1.4)
Total	304(100.0)	2451 (100.0)	180(100.0)	1711(100.0)	484(100.0)	4162(100.0)
Grand Total	2755		1891		4646	



EVER DRUNK ALCOHOL  
(e.g. Beer, Brandy, etc).

Ever Drunk Alcohol	Kelantan Lower Secondary	
	Drug Users	Non Drug Users
Never drink any alcohol	280 (92.1)	2369(96.7)
Seldom drink	8 ( 2.6)	49( 2.0)
Sometimes drink	12 ( 3.9)	22( 0.9)
Often drink	3 ( 0.9)	-
No information	1 ( 0.3)	11( 0.5)
Total	304	2451

TABLE 7

FREQUENCY OF USAGE FOR  
WHISKY, GIN OR OTHER SPIRITS

Frequency of Usage	Kelantan Upper Secondary	
	Drug Users	Non Drug Users
About everyday	4 (2.2)	2 (0.1)
Several times a week	3 (1.7)	1 (0.1)
About once a week	-	1 (0.1)
Two or three times a month	6 (3.3)	1 (0.1)
Once a month	3 (1.7)	1 (0.1)
Less once a month	15 (8.3)	24 (1.4)
Never	149 (82.8)	1679 (98.1)
No information	-	2 (0.1)
Total	180	1711

B. Patterns of drug abuse

The relative frequencies of use of all illicit drugs included in the survey is given in the summary table, which is derived from the analyses for each drug type to be presented later in this section. It shows the range of drugs in current use, and the considerable differences between upper and lower samples in the drugs of preference. Thus, rank ordering drugs by whether they had ever been used, the order (from the most to least) is:-

LOWER: Sedatives, Stimulants, Amphetamine, Tranquillizers, Heroin, Morphine/Opium, Psychedelics, Ganja.  
UPPER: Ganja, Tranquillizers, Stimulants (Amphetamine), Sedative, Heroin, Morphine/Opium.

Summary table of drugs used ("drug user" sample only)

	LOWER SCHOOLS		UPPER SCHOOLS	
	"NEVER"	"HAVE EXPERIENCED"	"NEVER"	"HAVE EXPERIENCED"
Ganja	87.2	12	49.4	48
Psychedelics	54.3	39	-	-
Tranquillizers	51.3	25	63.3	36.7
Heroin	51.6	27	84	16.1
Sedatives	37.5	25.7	69	30.6
Morphine/Opium	56.6	24.3	85.6	14.4
Stimulants/Amphetamine	47.7	23.7	66.1	33.9

It should be noted, however, that the numbers who had "experienced" a drug are not necessarily an indication of frequency of present usage: a point which will become evident in the analysis by drug type to be presented below. However, there is still striking evidence for the much greater importance placed on ganja by the older than the younger drug using sample, where psychedelics feature as an important continuing drug, along with heroin, tranquilizers, morphine and amphetamine.

#### Ganja (cannabis) (Tables 8, 9 and 10)

Ganja (cannabis) is seldom the drug of choice for younger drug users (of whom only 10.9% have ever tried, and a further 4.9% have never tried but would like to try), and is the most frequently experienced drug among the older group (48% have already tried, with a further 10.6% expressing interest). Of the non users, 4.0% of the younger sample and 7% of the older express interest in trying the drug. With respect to this finding, and all similar statistics relating to other substances, it should be said that the current level of public discussion of drugs is inevitably going to raise the interest in drugs for a percentage of individuals who would not otherwise have been aware of them.

Frequency of use statistics for ganja show that over half (55%) of those who report having ever tried ganja have only had one or two experiments with it; and only 24% could be said to have had any regular use of the drug (with 9% having "lost count of the number of times" that they have used it. This distribution is largely borne out by the estimates of use during the previous two months - with 5.6% of those who had ever used the drug being daily users, and a further 13% having a lower level of regular use.

#### Psychedelic drugs

As many as 45% of the younger drug users claim that they had ever used psychedelic drugs -- with nearly half of these stating that their use had been "very often", as against 14% stating their use been rare.

TABLE 8

#### EVER TRIED GANJA

	Lower Secondary		Upper Secondary		Total	
	Drug Users	Non-Drug Users	Drug Users	Non-Drug Users	Drug Users	Non-Drug Users
Ever Tried						
Have tried	33 (10.9)	-	86 (47.8)	-	119 (24.6)	-
Have not tried and would like to try	15 (4.9)	100 (4.0)	19 (10.6)	72 (4.2)	34 (7.0)	172 (4.1)
Have not tried and would not like to try	244 (80.3)	2319 (94.6)	75 (41.7)	1639 (95.8)	319 (65.9)	3958 (95.1)
No information	12 (3.9)	32 (1.3)	-	-	12 (2.5)	32 (0.8)
Total	304	2451	180	1711	484	4162

TABLE 9

FREQUENCY OF USAGE FOR GANJA

Frequency of Usage	Lower Secondary	Upper Secondary	Total
	Drug Users	Drug Users	Drug User
Never tried	265 (87.2)	89 (49.4)	354 (73.1)
Once or twice	22 ( 7.2)	49 (27.2)	71 (14.7)
Less than 10 times	10 ( 3.3)	19 (10.6)	29 ( 6.0)
10 - 50 times	3 ( 1.0)	11 ( 6.1)	14 ( 2.9)
50 - 100 times	-	4 ( 2.2)	4 ( 0.8)
Lost count of no. of times	4 ( 1.3)	8 ( 4.4)	12 ( 2.5)
Total	304	180	484

TABLE 10

FREQUENCY OF USAGE FOR GANJA  
IN THE LAST 2 MONTHS

Frequency of Usage	Upper Secondary
	Drug Users
Never tried	89 (49.4)
Have not used in last 2 months	44 (23.5)
Once or twice	28 (15.6)
Once a week or less	6 ( 3.3)
Twice a week	3 ( 1.7)
3 or 4 times a week	1 ( 1.7)
5 or 6 times a week	1 ( 0.6)
Daily	6 ( 3.3)
Total	180

TABLE 11

FREQUENCY OF USAGE FOR TRANQUILLIZER

Frequency of Usage	Lower Secondary
	Drug Users
Never	156 (51.3)
Rarely	65 (21.4)
Quite often	38 (12.5)
Very Often	37 (12.2)
No information	8 ( 2.6)
Total	304

Tranquillizers (Tables 11, 12 and 13)

More younger users than older users had ever experienced tranquillizers (49% as opposed to 40%) and indeed more of the experienced younger users were continuing (24% reported that they had used these drugs "very often") than older users (6% of whom reported daily use). A further 16.7% of older drug users have not tried tranquillizers, but would like to (as would 9% of older non drug users). Current levels of use amongst older users show the majority of those who have ever used tranquillizers are now not using them (95%), with only 8.3% having used the drug consistently (weekly or more frequently) during the preceding two months.

Stimulants/Amphetamines (Tables 14, 15 and 16)

47% of younger drug users and 31% of older users have ever experienced stimulants, with 13.8% of the younger group saying that they had used them very often, and 7% of the older group claiming that they were regular users. Although asked specifically about their use -- in the preceding two months, this figure reduces to 5% of the older drug user sample. Interest in stimulants is high amongst those drug users who have not yet tried them (15.6% expressing the desire to try them, as against 7.5% of non drug users so answering).

Sedatives/Barbiturates (Tables 17, 18 and 19)

58% of younger drug users and 26% of older users have ever experienced sedatives, with 13.5% of the younger group claiming that they had used sedatives very often, and 5.5% of the older group saying that they were regular users. Asked, for the preceding two months how often they had used the drug, those using weekly or more often were 5%. Interest in sedatives amongst those who have not tried them was expressed by 25.6% of older drug users and 18.2% of older non users -- a strikingly high number.

TABLE 12

FREQUENCY OF USAGE FOR TRANQUILLIZERS

Frequency of Usage	Upper Secondary
	Drug Users
Never tried	108 (60.0)
Once or twice	56 (31.1)
Once a week	3 ( 1.7)
Several times a week	1 ( 0.6)
Once a day	6 ( 3.3)
Two or more times a day	6 ( 3.3)
Total	180

TABLE 13

FREQUENCY OF USAGE FOR TRANQUILLIZERS  
IN LAST 2 MONTHS

Frequency of Usage	Upper Secondary
	Drug Users
Never tried	108 (60.0)
Have not used in the last 2 months	53 (29.5)
Once or twice	4 ( 2.2)
Once a week	2 ( 1.1)
Several a week	2 ( 1.1)
Once a day	8 ( 4.4)
2 or more a day	3 ( 1.7)
Total	180

TABLE 14

FREQUENCY OF USAGE FOR STIMULANTS/AMPHETAMINES

Frequency of Usage	Lower Secondary
	Drug Users
Never	145 (47.7)
Rarely	72 (23.7)
Quite Often	30 ( 9.9)
Very Often	42 (13.8)
No information	15 ( 4.9)
Total	304

TABLE 15

FREQUENCY OF USAGE FOR STIMULANTS/AMPHETAMINES

Frequency of Usage	Upper Secondary
	Drug Users
Never tried	125 (69.4)
Once or twice	37 (20.6)
Once a week	5 ( 2.8)
Several times a week	11 ( 6.1)
Once a day	1 ( 0.6)
Two or more times a day	1 ( 0.6)
Total	180

TABLE 16

FREQUENCY OF USAGE FOR STIMULANTS/AMPHETAMINES

IN LAST 2 MONTHS

Frequency of Usage	Upper Secondary
	Drug Users
Never tried	125 (69.4)
Have not used in the last 2 months	31 (19.2)
Once or twice	15 ( 8.3)
Once a week	1 ( 0.6)
Several a week	7 ( 3.9)
2 or more a day	1 ( 0.6)
Total	180

TABLE 17

FREQUENCY OF USAGE FOR SEDATIVES

Frequency of Usage	Lower Secondary
	Drug Users
Never	114 (37.5)
Rarely	99 (32.6)
Quite often	37 (12.2)
Very often	41 (13.5)
No information	13 ( 4.3)
Total	304

TABLE 18

FREQUENCY OF USAGE FOR SEDATIVES/BARBITURATES

Frequency of Usage	Upper Secondary
	Drug Users
Never tried	133 (73.9)
Once or twice	36 (20.0)
Once a week	5 ( 2.8)
Several times a week	4 ( 2.2)
Two or more times a day	1 ( 0.6)
No information	1 ( 0.6)
Total	180

TABLE 19

FREQUENCY OF USAGE FOR SEDATIVES/BARBITURATES  
IN THE LAST 2 MONTHS

Frequency of Usage	Upper Secondary
	Drug Users
Never tried	133 (73.1)
Have not used in the last 2 months	22 (12.1)
Once or twice	16 ( 8.9)
Once a week	4 ( 2.2)
Several a week	3 ( 1.7)
Once a day	1 ( 0.6)
2 or more a day	1 ( 0.6)
Total	180

Heroin (Tables 20, 21 and 22)

41.4% of younger users and 16% of older users claim ever to have experienced heroin, with 16.8% of the younger sample indicating that they had "very often" used the drug, and 7% of older users claiming regular use -- with 6% having weekly or more frequent use during the preceding two months. 16.7% of users but only 2.9% of non users - who lack experience of the drug express interest in trying the drug.

Morphine/Opium (Tables 23, 24 and 25)

36.5% of younger users and 12.2% of older users claim ever to have experienced morphine or opium with 14.1% of the younger users claiming that they had used either of the drugs "very often", and 2.3% of the older users claiming regular use, with 1.2% having weekly or more frequent use in the preceding two months. 16.1% users who have not experienced the drug indicate that they would be interested in trying it, but only 2.8% of non users indicate such interest.

Interest in drugs by those who have not experienced particular drugs is relatively high among drug users, and relatively low, but by no means insignificant, among the non users. Furthermore, it is notable that non users, in this professed curiosity, sharply differentiate between the opiates (a mere 2.8% of the non user sample expressing interest) and ganja (4.2% of non users) on the one hand, and sedatives or barbiturates (18.9%) on the other, with the other synthetics occupying an intermediate position: tranquillizers interest 9% and stimulants 7.5%. As later items in the questionnaire indicate, most non user respondents classify ganja with the clearly harmful drugs; the present finding may perhaps be taken as evidence that they do not regard the synthetic drugs as being so potentially harmful.

Age of Initiation (Tables 26 and 27)

Age of initiation is tabulated separately for ganja and for other drugs. Although there are a few individuals whose experience with the drug was at 10 years or less, and a few who, for each succeeding year, date their experience, it is only at the Upper Secondary School age - and especially in the years 15, 16 and 16, that the large majority of ganja users started using the drug (and indeed, as noted above, also stopped again in the many experimental cases).

TABLE 20

FREQUENCY OF USAGE FOR HEROIN

Frequency of Usage	Lower Secondary
	Drug Users
Never	157 (51.6)
Rarely	43 (14.1)
Quite often	32 (10.5)
Very often	51 (16.8)
No information	21 ( 6.9)
Total	304

TABLE 21

FREQUENCY OF USAGE FOR HEROIN

Frequency of Usage	Upper Secondary
	Drug Users
Never tried	152 (84.4)
Once or twice	17 ( 9.4)
Once a week	4 ( 2.2)
Several times a week	2 ( 1.1)
Once a day	2 ( 1.1)
2 or more times a day	3 ( 1.7)
Total	180

TABLE 22

FREQUENCY OF USAGE FOR HEROIN

IN LAST 2 MONTHS

Frequency of Usage	Upper Secondary
	Drug Users
Never tried	148 (82.2)
Have not used in the last 2 months	9 ( 5.0)
Once or twice	13 ( 7.2)
Once a week	7 ( 3.9)
Several times a week	1 ( 0.6)
Once a day	1 ( 0.6)
2 or more times a day	1 ( 0.6)
Total	180

TABLE 23

FREQUENCY OF USAGE FOR MORPHINE/OPIUM

Frequency of Usage	Lower Secondary
	Drug Users
Never	172 (56.6)
Rarely	37 (12.2)
Quite often	31 (10.2)
Very often	43 (14.1)
No information	21 ( 6.9)
Total	304

TABLE 24

FREQUENCY OF USAGE FOR MORPHINE/OPIUM

Frequency of Usage	Upper Secondary
	Drug Users
Never tried	158 (87.8)
Once or twice	18 (10.0)
Several a week	2 ( 1.1)
Once a day	1 ( 0.6)
2 or more times a day	1 ( 0.6)
Total	180

TABLE 25

FREQUENCY OF USAGE FOR MORPHINE/OPIUM  
IN LAST 2 MONTHS

Frequency of Usage	Upper Secondary
	Drug Users
Never tried	158 (87.8)
Once or twice	18 (10.0)
Several a week	2 ( 1.1)
Once a day	1 ( 0.6)
2 or more times a day	1 ( 0.6)
Total	180

TABLE 26

AGE OF INITIATION FOR GANJA

Age of Initiation	Lower Secondary	Upper Secondary	Total
	Drug Users	Drug Users	
Never tried	268 (88.2)	85 (47.2)	353 (72.9)
10 years or less	4 ( 1.3)	2 ( 1.1)	6 ( 1.2)
11 years	3 ( 1.0)	-	3 ( 0.6)
12 years	3 ( 1.0)	1 ( 0.6)	4 ( 0.8)
13 years	7 ( 2.3)	5 ( 2.8)	12 ( 2.5)
14 years	7 ( 2.3)	9 ( 5.0)	16 ( 3.3)
15 years	11 ( 3.6)	20 (11.1)	31 ( 6.4)
16 years	-	34 (18.9)	34 ( 7.0)
17 years	-	18 (10.0)	18 ( 3.7)
18 years	-	5 ( 2.8)	5 ( 1.0)
20 years	-	1 ( 0.6)	1 ( 0.2)
No information	1 ( 0.3)	-	1 ( 0.2)
Total	304	180	484



TABLE 27

AGE OF INITIATION FOR DRUGS  
OTHER THAN GANJA/LSD

Age Of Initiation	Upper Secondary
	Drug Users
Never tried any drugs	92 (51.1)
Never tried any drugs besides ganja	36 (20.0)
10 years or less	1 ( 0.6)
12 years	1 ( 0.6)
13 years	3 ( 1.7)
14 years	1 ( 0.6)
15 years	11 ( 6.1)
16 years	15 ( 8.3)
17 years	15 ( 8.3)
18 years	4 ( 2.2)
No information	1 ( 0.6)
Total	180

For individuals now in Upper Secondary School, these years were also the peak years for initiation into other drugs (again noting that, for many, these were also purely experimental experiences, not leading to a continuation). This peak at 15, 16 and 17 years of age indicates something of the nature of drug experience that we may expect to be occurring amongst those adolescents who have dropped out of Secondary School.

Use of drugs as compared with twelve months ago (Table 28)

The reduced use of drugs reported by the majority of older users, and by many younger users bears out the observation that much early use of drugs is purely experimental -- and thus if one were at the experimenting stage a year ago, by now one might have ceased use altogether (and thus fall in the "reduced use" category). Thus, for ganja, more than three times as many report reduced as increased use; for stimulants or sedatives, five times; for heroin or morphine four times; and only in the case of opium was the reduction less noticeable. (Note, however, how very small are sample sizes are). For purposes of comparison, we may note that, in the same period, reduced alcohol use is reported by six times as many individuals as report increased use.

Younger users, who may more often be expected to be in the midst of experimentation, show almost approximately the same numbers who had increased as had reduced their use of drugs during the twelve month period.

C. Differences between drug users and non drug users

Social Background

Father's and mothers's occupation (Tables 29 and 30)

Drug abuse is found in a minority of the children of all social backgrounds; and no socio-economic group or occupation deviates significantly and consistently from the overall norm of about 10% of having had some drug experience. Thus, there is no consistent link between, for example, father's unemployment and drug abuse in the child: Whereas there is a very weak trend among the younger group (13.0% of the younger children of unemployed fathers being drug experienced as against a norm for the age group of 11.0%), there is no such trend among older children whose fathers were not working. Similarly, it would be

TABLE 28

USAGE OF DRUGS MORE OFTEN OR LESS OFTEN NOW THAN 12 MONTHS AGO

Drug Type	Lower Secondary					Upper Secondary				
	Use more often now	Use less often now	About the same	Never	No information	Use more often now	Use less often now	About the same	Never	No information
1. Whisky, brandy, beer, gin, etc.	26 (8.6)	22 (7.2)	19 (6.3)	237 (78.0)	-	3 (1.7)	20 (11.1)	11 (6.1)	146 (81.1)	-
2. Ganja	21 (6.9)	25 (8.2)	24 (7.9)	228 (75.0)	6 (2.0)	12 (6.7)	41 (22.8)	9 (5.0)	118 (65.6)	-
3. Stimulants or Sedatives	19 (6.3)	55 (18.1)	32 (10.5)	193 (63.5)	5 (1.6)	6 (3.3)	30 (16.7)	12 (6.7)	132 (73.3)	-
4. Heroin or Morphine	29 (9.5)	18 (5.9)	22 (7.2)	230 (75.7)	5 (1.6)	3 (1.7)	13 (7.2)	5 (2.8)	159 (88.3)	-
5. Opium	24 (7.9)	13 (4.3)	16 (5.3)	245 (80.6)	6 (2.0)	4 (2.2)	5 (2.8)	3 (1.7)	167 (92.8)	1 (0.6)
Total	119	133	113	1133	22	28	109	40	722	1

TABLE 29

FATHER'S OCCUPATION OF DRUG USERS AND NON-DRUG USERS

Occupation	Lower Secondary		Upper Secondary		Lower	Upper
	Drug Users	Non-Drug Users	Drug Users	Non-Drug Users		
Not working	28 (13.0)	187 (87.0)	11 (9.8)	101 (90.2)	215	112
Manual work	101 (12.4)	711 (87.6)	72 (8.4)	787 (91.6)	812	859
Semi-skilled work	42 (10.6)	353 (89.4)	5 (3.4)	140 (96.6)	395	145
Office work	15 (9.3)	146 (90.7)	5 (10.9)	41 (89.1)	161	46
Serving in shop	28 (12.4)	197 (87.6)	15 (9.6)	141 (90.4)	386	219
Teacher	13 (7.3)	164 (92.7)	18 (11.7)	136 (88.3)	177	154
Professional	21 (9.4)	203 (90.6)	10 (19.2)	42 (80.8)	224	52
Shopowner	1 (3.0)	32 (97.0)	20 (18.3)	89 (81.7)	33	109
No Information	22 (17.3)	105 (82.7)	2 (5.1)	37 (94.9)	127	39
Total	304 (11.0)	2451 (89.0)	180 (9.5)	1711 (90.5)		

Key:

% is no. of responses (drug users and non-drug users) over total respondents

TABLE 30

MOTHER'S OCCUPATION OF DRUG USERS & NON-DRUG USERS

Occupation	Lower Secondary		Upper Secondary		Lower Respondents	Upper Respondents
	Drug Users	Non-Drug Users	Drug Users	Non-Drug Users		
Not working	176 (9.6)	1657 (90.4)	131 (9.7)	1224 (90.3)	1833	1355
Manual work	21 (13.5)	135 (86.5)	14 (7.5)	172 (92.5)	156	186
Semi-skilled work	26 (17.0)	127 (83.0)	2 (9.5)	19 (90.5)	153	21
Skilled work	6 (16.2)	31 (83.8)	-	6 (100.0)	37	6
Office work	15 (17.4)	71 (82.6)	6 (16.2)	31 (83.8)	86	37
Serving in shop	17 (9.4)	163 (90.6)	8 (5.2)	146 (94.8)	180	154
Teacher	10 (13.0)	67 (87.0)	8 (19.0)	34 (81.0)	77	42
Professional	4 (8.5)	43 (91.5)	3 (33.3)	6 (66.7)	47	9
Shopowner	2 (20.0)	8 (80.0)	6 (11.5)	46 (88.5)	10	52
No information	27 (15.3)	149 (84.7)	2 (6.9)	27 (93.1)	176	29
Total	304 (11.0)	2451 (89.0)	180 (9.5)	1711 (90.5)	2755	1891

Key:  
% is no. of responses (drug users and non-drug users) over total respondents

fruitless to speculate upon any link between parental manual work and a child's increased likelihood of taking drugs on the basis of this younger groups's being 1.4% above the norm, given that the equivalent older group are 1.1% below the norm for their age. Any such trend by occupational group at one age is in each case counterbalanced by the opposite trend at the other age: and one can safely conclude that the minority habit of drug use is very evenly spread throughout the social groups in Kelantan.

If father's occupation is thus not predictive of drug abuse amongst the children, then mother's occupation is even less so, for the majority of mothers are not in paid employment (66.5% of younger and 71.6% of older children's mothers fall in this category).

#### Family size

Family size is not an indicator of increased likelihood of drug use. The size and structure of the families whence drug users come almost exactly match the pattern observed among the families of non users; and there is no evidence that, for example, only children, or children from large families are more at risk than others.

#### Religion/Ethnicity

The sample is very largely Islamic (89.4% overall, with 87.6% of the younger sample and as many as 92.2% of the older being Malays). The next largest group the Buddhists, comprise 6.9% (8.3% of the younger school pupils but declining to 5.0% of the older population). No other group, Roman Catholic, other Christians, Hindu or atheist, represent as much as 1% of the total sample. Given such small cell sizes, any variations in drug user rates between these latter groups must be seen as large a matter of chance fluctuations due to sampling. No significance can thus be attached to the over-representation of younger Christians and Hindus, especially given that the older members of these groups do not show these trends.

Among the younger individuals, Muslims and Buddhists have almost exactly the same proportion who are drug users (10.8% to 10.1%); but among the older individuals, whereas 9.6% of Muslims are users, only 4 individuals (out of the Buddhist sample of 95) are users.

Educational aspirations and achievement

Own personal ambitions in education (Table 31)

Throughout the sample, personal aspirations are high. Thus, 90% of the older non users wish to to University. Predictably, too, the older (and more selected) Upper level pupils have higher aspirations than the younger sample. Drug use is associated with some depression of these hopes (only 66% of young users as opposed to 81% younger non users have University education as their ambition; and 12.5% of the drug users as opposed to only 6.4% of non drug users expect only to reach Form Three). Even given this general observation, it still remains true that the majority of drug users remain well within the usual range of ambitions even though 2% drug users reported that they did not care at all about education - a response almost unheard of amongst non users - it must be noted that they represent a very atypical group amongst the drug users.

Expectations (Tables 32 and 33)

Expectations of what education level will actually be attained (as opposed to the ideal aspired to) is almost as optimistic as the ambitions themselves. 78.7% of older non users, and 72.8% of users, expect to achieve a University education; and both groups are equally conscious of the (unrealistically) high level of expectations that their parents have for them (90% have parents who are thinking in terms of their children going to University). Thus users have in the main similar educational expectations, and very similar parental backing for their aspirations.

Attitudes towards the school (Table 34)

Attitudes towards the school held by the large majority of younger drug users are similar to those held by non users of the same age, thus, the large majority of all younger children, whether users or not feel that they can express themselves freely at school; and would disagree with any suggestion that they were wasting their time in school. And, just as the younger drug users are almost evenly divided as to whether or not school rules are too strict, so are the younger non users.

TABLE 31

OWN PERSONAL AMBITIONS IN EDUCATION

	Lower Secondary		Upper Secondary	
	Drug Users	Non-Drug Users	Drug Users	Non-Drug Users
Don't care about passing	5( 1.6)	18( 0.7)	4( 2.2)	4( 0.2)
Pass Form 3	38(12.5)	157( 6.4)	-	-
Pass Form 5/M.C.E.	8( 2.6)	22( 0.9)	9( 5.0)	34( 2.0)
Pass Form 6/H.S.C.	8( 2.6)	40( 1.6)	6( 3.3)	22( 1.3)
Go to college	38(12.5)	207( 8.4)	12( 8.3)	102( 6.0)
Go to university	201(66.1)	1991(81.2)	143(79.4)	1541(90.1)
No information	6( 2.0)	16( 0.7)	3( 1.7)	8( 0.5)
Total	304	2451	180	1711

TABLE 32

OWN EXPECTATIONS OF EDUCATION

	Upper Secondary		Total No. of Respondents
	Drug Users	Non-Drug Users	
Don't care about passing	5 ( 2.8)	2 ( 0.1)	7
Pass Form 5/M.C.E.	14 ( 7.8)	80 ( 4.7)	94
Pass Form 6/H.S.C.	12 ( 6.7)	141 ( 8.2)	153
Go to College	18 (10.0)	128 ( 7.5)	146
Go to university	131 (72.8)	1346 (78.7)	1477
No information	-	14 ( 0.8)	14
Total	180	1711	1891

TABLE 33

PARENTAL EXPECTATION OF P.I.L'S EDUCATION

	Upper Secondary		Total no. of Respondents
	Drug Users	Non-Drug Users	
Don't care about exam	2 ( 1.1)	14 ( 0.8)	16
Pass Form 5/M.C.E.	6 ( 3.3)	39 ( 2.3)	45
Pass Form 6/H.S.C.	2 ( 1.1)	20 ( 1.2)	22
Go to college	7 ( 3.9)	72 ( 4.2)	79
Go to university	162 (90.0)	565 (91.5)	1727
No information	1 ( 0.6)	1 ( 0.1)	2
Total	180	711	1891

TABLE 34  
ATTITUDES TOWARDS SCHOOL

	Lower Secondary						Upper Secondary					
	Drug Users			Non-Drug Users			Drug Users			Non-Drug Users		
	Agree	Disagree	No information	Agree	Disagree	No information	Agree	Disagree	No information	Agree	Disagree	No information
Can express self freely	268 (88.2)	29 (9.5)	7 (2.3)	2143 (87.4)	288 (11.8)	20 (0.8)	141 (78.3)	39 (21.7)	-	1575 (92.1)	134 (7.8)	2 (0.1)
Wasting my time in school	33 (10.9)	254 (83.6)	17 (5.6)	136 (5.5)	2252 (91.9)	63 (2.6)	57 (31.7)	122 (67.8)	1 (0.6)	324 (18.9)	1384 (80.9)	3 (0.2)
School rules too strict	162 (53.3)	126 (41.4)	16 (5.3)	1169 (47.7)	1208 (49.3)	74 (3.0)	77 (42.8)	103 (57.2)	-	732 (42.8)	974 (56.9)	5 (0.3)

When one compares the attitudes held by the older pupils, however, there appears some measure of disagreement between a minority of the drug users and the majority view held by most drug users and non users. Thus, whereas only 7.8% of older non users feel their freedom of expression to be constrained in school, 21.7% of older users do so; and 31.7% of the latter (compared with only 18.9% of non users) feel that they are wasting their time at school. The school rules issue, however, finds the same breadth of opinion in users and non users.

#### School performance and absenteeism (Table 35 and 36)

Over half of the older drug users (51%) rate their school performance as "average", whereas 51% of similar aged non users rate their performance as "good". Younger individuals in general, and younger drug users in particular, are somewhat more boastful (13% of younger non users and 24% of users rating their performance as "very good"), with the remainder of each group almost equally divided between the good and the average. In no group is there an appreciable group whose work is "poor" (only the young drug users reach 5.6% giving this response); and thus, drug use cannot be said to be associated with any marked drop in performance, although the older drug users' response may lead one to conclude that, in reality, the standard may be somewhat depressed when compared with their contemporaries.

Absences from school of more than five days in the past two months are reported by 20% drug users, but only 9% of non users. Indeed, 42% of non users, but only 31% of users can report a continuous attendance record throughout this period. Genuine illness and disaffection with school may combine to bring about such differences which, although not of great magnitude, are nonetheless useful signs of trouble for a minority of the drug users.

#### Television watching patterns

Television watching patterns of drug users follow the pattern found among non users almost exactly; with overall slightly fewer children (37%) watching television for less than one hour each day than those who watched it for between one and three hours each day (42%). Clearly, drug users do not manifest any abnormal dependence upon television as an alternative source of social stimulation.

TABLE 35

SCHOOL PERFORMANCE  
(LOWER AND UPPER SECONDARY)

	Lower Secondary		Upper Secondary	
	Drug Users	Non-Drug Users	Drug Users	Non-Drug Users
Very good	75(24.7)	332(13.5)	11( 6.1)	134( 7.8)
Good	95(31.3)	1046(42.7)	65(36.1)	876(51.2)
Average	105(34.5)	975(39.8)	92(51.1)	653(38.2)
Below average	7( 2.3)	26( 1.1)	8(4.4)	30( 1.8)
Poor	17( 5.6)	35( 1.4)	4( 2.2)	13( 0.8)
No information	5( 1.6)	37( 1.5)	-	5( 0.3)
Total	304	2451	180	1711

TABLE 36

ABSENTEEISM FROM SCHOOL (UPPER SECONDARY)

	Upper Secondary		Total No. of Respondents
	Drug Users	Non-Drug Users	
None	56(31.1)	724(42.3)	780
Less than 2 days	38(21.1)	504(29.5)	542
3 to 5 days	49(27.2)	336(19.6)	385
6 to 10 days	11( 6.1)	87( 5.1)	98
11 to 15 days	10( 5.6)	28( 1.6)	38
16 to 25 days	7(3.9)	13( 0.8)	20
26 to 50 days	4( 2.2)	6( 0.4)	10
Over 50 days	5( 2.8)	8( 0.5)	13
No information	-	5( 0.3)	5
Total	180	1711	1891

Reported self contentment

Reported self contentment, however, differentiate many of the users from the non-users. Nearly half of the users (49.4%) as against 29.9% of the non-users reported themselves either as being "not too happy" or "not happy at all": a striking and important difference although the direction of causality between this mental state and the use of drugs is not clear.

Health

Health is again a partial differentiator of the sub-samples: 43.4% of the users, but only 25.4% of non users rated themselves as only being fair or poor in health. And in the preceeding two months, more users than non users had "often" had headaches, trouble sleeping and feelings of nervousness, with a similar trend towards more stomach upset and nightmares. The trend is worthy of note, being constant across all complaint and age groups, although it must also be pointed out that in each case, it is only a minority of drug users (between 8 - 22%) who report having these symptoms frequently. Contentment and health condition differences may be cast in either a causal or consequential role with relation to drug taking: a frequency survey such as the present one cannot differentiate the two; and, indeed, it is likely that the condition may be both cause and consequence.

Self Descriptions (Tables 37, 38, 39, 40, 41, 42 and 43)

Self Descriptions:

How far do drug users see themselves in any way as different from non users of the same age? On a lengthy list of items included in the questionnaire (47 questions were devoted to the topic in the larger version, and a subset of these were given in the shorter, Lower School version), only a minority of items showed any significant difference in average response; on most items, the range of self description by drug users is very similar to that amongst non users. Thus, drug users and non users have the same range of views on the following items:

TABLE 37

## SELF DESCRIPTION I (LOWER SECONDARY)

Lower Secondary												
	Drug Users						Non-Drug Users					
	A	B	C	D	E	No infor mation	A	B	C	D	E	No infor mation
Know what I want of life	107 (35.2)	104 (34.2)	66 (21.7)	13 ( 4.3)	6 ( 2.0)	8 ( 2.6)	812 (33.1)	794 (32.4)	651 (26.6)	100 ( 4.1)	55 ( 2.2)	39 ( 1.6)
Feel left out	34 (11.2)	77 (25.3)	103 (33.9)	64 (21.1)	19 ( 6.3)	7 ( 2.3)	203 ( 8.3)	564 (23.0)	952 (38.8)	490 (20.0)	192 ( 7.8)	50 ( 2.0)
Easy to have a good time	26 ( 8.6)	70 (23.0)	89 (29.3)	77 (25.3)	33 (10.9)	9 ( 3.0)	147 ( 6.0)	459 (18.7)	716 (29.2)	781 (31.9)	298 (12.2)	50 ( 2.0)
Bored a lot of the time	21 ( 6.9)	42 (13.8)	79 (26.0)	102 (33.6)	53 (17.4)	7 ( 2.3)	73 ( 3.0)	259 (10.6)	675 (27.5)	914 (37.3)	454 (18.5)	76 ( 3.1)
Feel close to friends	77 (25.3)	128 (42.1)	52 (17.1)	14 ( 4.6)	26 ( 8.6)	7 ( 2.3)	611 (24.9)	1094 (44.6)	449 (18.3)	166 ( 6.8)	77 ( 3.1)	54 ( 2.2)
Like to go out with friends	23 ( 7.6)	66 (21.7)	75 (24.7)	84 (27.6)	47 (15.5)	9 ( 3.0)	131 ( 5.3)	358 (14.6)	513 (20.9)	951 (38.8)	435 (17.7)	63 ( 2.6)
Make friends easily	49 (16.1)	109 (35.9)	94 (30.9)	20 ( 6.6)	15 ( 4.9)	17 ( 5.6)	405 (16.5)	851 (34.7)	875 (35.7)	164 ( 6.7)	97 ( 4.0)	59 ( 2.4)
Total	337	596	558	374	199	64	2382	4379	4831	3566	1608	391

A - Strongly agree  
B - Agree  
C - Not sure  
D - Disagree  
E - Strongly disagree

TABLE 38

## SELF DESCRIPTION I (UPPER SECONDARY)

Upper Secondary													
	Drug Users							Non-Drug Users					
	A	B	C	D	E	No infor mation	A	B	C	D	E	No infor mation	
Know what I want of life	52 (28.9)	42 (23.3)	76 (42.2)	5 (2.8)	5 (2.8)	-	444 (25.9)	623 (36.4)	581 (34.0)	43 (2.5)	18 (1.1)	2 (0.1)	
Feel left out	21 (11.7)	55 (30.6)	51 (28.3)	37 (20.6)	15 (8.3)	1 (0.6)	123 (7.2)	447 (26.1)	586 (34.2)	414 (24.2)	137 (8.0)	4 (0.2)	
Easy to have a good time	23 (12.8)	59 (32.8)	43 (23.9)	40 (22.2)	14 (7.8)	1 (0.6)	143 (8.4)	411 (24.0)	459 (26.8)	531 (31.0)	162 (9.5)	5 (0.3)	
Bored a lot of the time	21 (11.7)	49 (27.2)	33 (18.3)	52 (28.9)	23 (12.8)	2 (1.1)	72 (4.2)	252 (14.7)	358 (20.9)	753 (44.0)	270 (15.8)	6 (0.4)	
Feel close to friends	48 (26.7)	87 (48.3)	37 (20.6)	5 (2.8)	3 (1.7)	-	340 (19.9)	932 (54.5)	331 (19.3)	90 (5.3)	17 (1.0)	1 (0.1)	
Liked to go out with friends	23 (12.9)	49 (27.2)	28 (15.6)	58 (32.2)	22 (12.2)	-	94 (5.5)	308 (18.0)	349 (20.4)	712 (41.6)	246 (14.4)	1 (0.1)	
Make friends easily	35 (19.4)	85 (47.2)	47 (26.1)	6 (3.3)	7 (3.9)	-	254 (14.8)	686 (40.1)	610 (35.7)	130 (7.6)	31 (1.8)	-	
Total	223	426	315	203	89	4	1470	3659	3274	2673	881	20	

A - Strongly agree  
B - Agree  
C - Not sure  
D - Disagree  
E - Strongly disagree



TABLE 39

SELF DESCRIPTION II (LOWER SECONDARY)

Lower Secondary												
	Drug Users						Non-Drug Users					
	1	2	3	4	5	No infor mation	1	2	3	4	5	No infor mation
Easy to have a good time	34 (11.2)	55 (18.1)	101 (33.2)	61 (20.1)	43 (14.1)	10 ( 3.3)	102 ( 4.2)	387 (15.8)	874 (35.7)	603 (24.6)	460 (18.8)	25 ( 1.0)
Do what I want	21 ( 6.9)	57 (18.8)	57 (22.0)	57 (18.8)	93 (30.6)	9 ( 3.0)	86 ( 3.5)	298 (12.2)	497 (20.3)	541 (22.1)	994 (40.6)	35 ( 1.4)
Go with friends' ideas	24 ( 7.9)	55 (18.1)	101 (33.2)	73 (24.0)	45 (14.8)	6 ( 2.0)	78 ( 3.2)	243 ( 9.9)	1090 (44.5)	710 (29.0)	295 (12.0)	35 ( 1.4)
Finish something as promised	60 (19.7)	151 (49.7)	39 (12.8)	15 ( 4.9)	32 (10.5)	7 ( 2.3)	508 (20.7)	1525 (62.2)	163 ( 6.7)	93 ( 3.8)	132 ( 5.4)	30 ( 1.2)
Friends ask my opinion about things	50 (16.4)	79 (26.0)	71 (23.4)	62 (20.4)	31 (10.2)	11 ( 3.6)	301 (12.3)	667 (27.2)	780 (31.8)	470 (19.2)	187 ( 7.6)	46 ( 1.9)
Do as little work as I can	54 (17.8)	119 (39.1)	46 (15.1)	31 (10.2)	43 (14.1)	11 ( 3.6)	288 (11.8)	802 (32.7)	371 (15.1)	317 (12.9)	626 (25.5)	47 ( 1.9)
Afraid of doing new things	54 (17.8)	124 (40.8)	31 (10.2)	16 ( 5.3)	67 (22.0)	12 ( 3.9)	418 (17.1)	1189 (48.5)	285 (11.6)	174 ( 7.1)	346 (14.1)	39 ( 1.6)
Total	297	640	456	315	354	66	1781	5111	4060	2908	3040	257

- 1 - Always true  
2 - True  
3 - Sometimes true  
4 - Seldom true  
5 - Not true

TABLE 40

SELF DESCRIPTION II (UPPER SECONDARY)

	Upper Secondary									
	Drug Users					Non-Drug Users				
	1	2	3	4	No information	1	2	3	4	No information
First to wear new styles	28 (15.6)	49 (27.2)	48 (26.7)	54 (30.0)	1 (0.6)	98 (5.7)	346 (20.2)	439 (25.7)	828 (48.4)	-
Do what I want	64 (35.6)	80 (44.4)	22 (12.2)	14 (7.8)	-	360 (21.0)	693 (40.5)	474 (27.7)	183 (10.7)	1 (0.1)
Go along with friends	12 (6.7)	89 (49.4)	59 (32.8)	19 (10.6)	1 (0.6)	107 (6.3)	958 (56.0)	565 (33.0)	80 (4.7)	1 (0.1)
Finish something as promised	115 (63.9)	38 (21.1)	13 (7.2)	14 (7.8)	-	1284 (75.0)	238 (13.9)	108 (6.3)	79 (4.6)	2 (0.1)
Friends ask my opinion about things	66 (33.6)	69 (38.3)	38 (21.1)	7 (3.9)	-	520 (30.4)	756 (44.2)	380 (22.2)	54 (3.2)	1 (0.1)
Do as little work as I can	49 (27.2)	49 (27.2)	37 (20.6)	45 (25.0)	-	549 (32.1)	389 (22.7)	392 (22.9)	2 (22.1)	1 (0.1)
Afraid of doing new things	62 (34.4)	44 (24.4)	32 (17.8)	41 (22.8)	1 (0.6)	832 (48.6)	372 (21.7)	225 (13.2)	282 (16.5)	-
Total	396	418	249	194	3	3750	3752	2583	1508	6

- 1 - Always true  
2 - Often true  
3 - Seldom true  
4 - Not true at all

TABLE 41

SELF DESCRIPTION III (UPPER SECONDARY)

	Upper Secondary					
	Drug Users			Non-Drug Users		
	Agree	Disagree	No information	Agree	Disagree	No information
Can do things well	160(88.9)	20(11.1)	-	1432(83.7)	275(16.1)	4 (0.2)
I am no good	83(46.1)	97(53.9)	-	441(25.8)	1270(74.2)	-
Need luck than hard work	106(58.9)	73(40.6)	1 (0.6)	1012(59.1)	691(40.4)	8 (0.5)
Hopeful most of the time	132(73.3)	46(25.6)	2 (1.1)	1441(84.2)	254(14.8)	16 (0.9)
Try to improve but someone stops me	85(47.2)	95(52.8)	-	630(36.8)	1078(63.0)	3 (0.2)
Can improve the world	73(40.6)	104(57.8)	3 (1.7)	825(48.2)	883(51.6)	3 (0.2)
Don't have chance to be successful	62(34.4)	118(65.6)	-	242(14.1)	1466(85.7)	3 (0.2)
Laws should be obeyed	142(78.9)	38(21.1)	-	1540(90.0)	171(10.0)	-
Total	843	591	6	7563	6088	37

SELF DESCRIPTION IV (UPPER SECONDARY)

TABLE 42

Key:

A - Agree Strongly

B - Agree

C - Not sure

D - Disagree

E - Disagree Strongly

	A	Upper Secondary										
		Drug Users					Non-Drug Users					
		B	C	D	E	No infor- mation	A	B	C	D	E	No infor- mation
Grown up	15	52	72	22	18	1	79	318	912	296	99	7
Follow example of friends	21	34	79	30	14	2	104	203	1016	249	131	8
Lonely	37	35	44	41	22	1	127	267	545	453	307	12
Taking risk	13	21	43	34	68	1	74	84	405	298	844	6
Popular with opposite sex	55	48	55	10	10	2	304	338	801	154	110	4
Try new things	60	41	37	21	20	1	253	268	539	283	361	7
Feel bullied	21	20	43	44	48	4	103	134	458	453	555	3
Care for others	49	39	40	25	25	2	427	366	511	194	205	8
Enjoy life	45	44	51	19	20	1	532	493	518	101	54	13
Get on in the world	65	36	48	12	13	6	680	294	551	91	80	15
Relaxed	38	41	52	25	22	2	456	481	527	153	69	25
Get on well with parents	60	42	23	24	29	2	835	355	280	133	98	10
Often bored	44	31	58	30	14	3	131	247	635	437	232	29
Solve my problems	63	46	35	15	16	5	840	384	324	93	51	19
Like to be alone	49	28	40	26	33	4	318	295	587	250	241	20
Stay on at school	97	31	25	13	12	2	1203	232	194	52	26	4
Can be relied on	77	53	31	10	7	2	841	416	372	44	24	14
Shy	25	40	42	26	45	2	228	312	516	254	383	18
Do what I want	67	35	48	15	14	1	613	368	549	101	73	7
Never think about drugs	67	24	41	23	24	1	1062	112	307	89	137	4
Total	968	741	907	465	474	45	9215	5967	10547	4178	4080	233

Refer to report pg. 106

TABLE 43

SELF DESCRIPTION Vs (UPPER SECONDARY)  
"HOW IMPORTANT ARE THE FOLLOWING TO YOU?"

	Upper Secondary						
	Non-Drug Users		Drug Users				
	A	B	C	No information	A	B	C
Make this a better world	733 (42.8)	794 (46.4)	183 (10.7)	1 (0.1)	65 (36.1)	82 (45.6)	33 (18.3)
Religion	1597 (93.3)	92 (5.4)	20 (1.2)	2 (0.1)	154 (85.6)	24 (13.3)	2 (1.1)
Making money	676 (39.5)	943 (55.1)	90 (5.3)	2 (0.1)	85 (47.2)	86 (47.8)	9 (5.0)
Getting good marks	1452 (84.9)	236 (13.8)	23 (1.3)	-	133 (73.9)	34 (18.9)	13 (7.2)

A - Very important      B - Quite important      C - Not important

TABLE 44

RELATIONSHIP WITH PARENTS (UPPER SECONDARY)

	Upper Secondary				Total no. of Respondents	
	Drug Users		Non-Drug Users			
	Mother	Father	Mother	Father	Mother	Father
Very close	126 (70.0)	53 (29.4)	1359 (79.4)	664 (38.8)	1485 (78.5)	717 (37.9)
Quite close	37 (20.6)	76 (42.2)	290 (16.9)	837 (48.9)	327 (17.3)	913 (48.3)
Not very close	10 ( 5.6)	38 (21.1)	43 ( 2.5)	149 ( 8.7)	53 ( 2.8)	187 ( 9.9)
Not close at all	6 ( 3.3)	8 ( 4.4)	7 ( 0.4)	28 ( 1.6)	13 ( 0.7)	21 ( 1.1)
No information	1 ( 0.6)	5 ( 2.8)	12 ( 0.7)	33 ( 1.9)	13 ( 0.7)	18 ( 1.0)
Total	180	180	1711	1711	1891	1891

Knowing what they want out of life	Lower and Upper	
Feeling left out	Lower and Upper	
Being bored much of the time	Lower	
Feel grown up	Upper	
Feel lonely	Upper	
Take risks	Lower and Upper	*
Popular with the opposite sex	Upper	
Feeling close to friends	Lower and Upper	
Making friends easily	Lower and Upper	
Finding it easy to have a good time	Lower and Upper	
Going along with friend's ideas	Lower and Upper	
Finishing something as promised	Upper	
Friend asking ones opinion	Lower and Upper	
Doing as little work as one can	Lower and Upper	
Afraid of doing new things	Lower	
Being able to do things well	Upper	
Needing luck more than hard work	Upper	
Being able to improve the world	Upper	
Following the example of friends	Upper	
Caring for others	Upper	
Getting on in the world	Upper	
Being reliable	Upper	
Being shy	Upper	
Doing what one wants	Upper	

Drug users do differ from the non drug users of the same age in that more of the former are:-

Bored a lot of the time	Upper	*
Like to go out with friend	Lower and Upper	
Do what they want	Lower and Upper	
(Do not) finish something as promised	Lower	*
First to wear new styles	Upper	*
(Not) afraid to do new things	Upper	
See themselves as "no good"	Upper	*

\* LARGER MINORITY

Not hopeful most of the time	Upper	*
Tried to improve but stopped	Upper	*
Do not have a chance to be successful	Upper	*
Trying new things	Upper	*
Feeling bullied	Upper	*
<u>Not</u> enjoying life	Upper	*
<u>Not</u> relaxed	Upper	*
Do <u>not</u> get on with parents	Upper	*
Often bored	Upper	
<u>Cannot</u> solve my problem	Upper	*
<u>Dislike</u> being alone	Upper	*
Think a lot about drugs	Upper	*

Thus, even on most of those items where there is a statistical difference in the distribution of self descriptions between the drug users and non users, it is still the case that the difference arises because the user sample contains a larger minority of individual expressing the view; with the majority of user holding to a point of view of themselves which is espoused by the majority of non users.

Therefore, one can conclude that differences in self concept by no means mark off the user population from the non user population: they do not inevitably see themselves as a drop-out group, or as more in the centre of their social group than do the users. However, from a minority sub-group of the users, there is confirmation of the hypothesis that the drug user does see himself as different, he may report himself as being more independent and fashion-conscious, and yet in some ways more negative ("no good", lacking hope, not having a chance) and unhappy (lonely, bored, unrelaxed, bullied). As stressed, it is a minority of drug users who fulfill this image of the user; but, for them, the picture is consistent: the rather unhappy independence seeker, to whom friends are most important.

#### Dependence upon others

If one were in serious trouble, to whom would one turn? Three quarters of all younger children - whether drug user or non user - would turn to their parents, with a further 13% specifying a particular family member. Older respondents show less strongly this reliance upon parents, with 11.7% of non users saying that they would most likely turn

to a friend. Older drug users show this independence of parents much more strongly: 32% specify a friend, and a further 15.6% saying that they would turn to no-one (compared with 6% in the rest of the older sample who gave this response).

#### Relations with parents (Table 44)

When asked directly about these, very few individual saw themselves as not being close to their mother (only 8.9% of drug users and 2.9% of non users say this); and few non users, again saw themselves as not close to their fathers. A substantial minority of drug users, however, described the relationship with their father as not-close (25.5% as against 10.3% of non users). Typically, children in the sample describe themselves as "very close" to their mothers, and "quite close" to their fathers.

#### Independence of parents

Independence of parents was assessed by asking who decided how late the child stays out at night. Significantly more often among drug users than among non users was the answer that the child himself decides (48.9% as against 25.9%) with correspondingly fewer drug users reporting that it was usually the collaborative decision of parents and child, or on the other hand the imposed decision of parent alone.

#### Parental disciplinary style

Parental disciplinary style, as seen by the child, showed a very similar spread across drug users and non drug users. The age groups, however, show significant differences, with, as would be expected, parents being much less likely to resort to punishment with older than with younger children.

And yet, it is notable that a larger minority of older drug users than non users (17.8% to 6.5%) felt that their parents were not strict enough with them.

Asked whose disapproval would matter most to them, all children indicated that the disapproval of their parents would be more important than that of anyone else. However, there is a slight tendency for more users than non users to feel unconcerned by anyone's opinion of them (21.1% of users, as against 16.9% of non users).

Attitudes towards drugs

General level of concern (Table 45)

Almost without exception, those children who do not use drugs report themselves worried about the use of drugs by young people; and this concern is felt also by the majority of drug users. The level of concern, however, does serve to differentiate the two groups: drug users are considerable less unanimous:- pronouncing themselves to be "worried a lot"; and 24.4% of their number are not much worried about the matter.

Feelings and beliefs about drugs (Table 46)

Non drug users of all ages are almost unanimous in their belief that smoking ganja at parties is not alright (97%); and are almost as decided in stating that it is not permissible to use sleeping pills without medical advice (89%). Older non users feel similarly that the regular use of ganja causes harm (86%) and that brandy, too, causes harm (84%), while the younger non users are somewhat less unanimous on these latter two points (68% and 67%).

Drug users, by and large, endorse these majority views; but, on each opinion, there is an appreciable minority (almost constant, at 25% of the older users) who do not hold the majority view, and hold instead a more accepting and permissive view of legal and illegal drugs. The younger users, indeed, are even more clearly split, being evenly divided on whether brandy or regular use of ganja causes harm; although interestingly, only 9.2% of the younger users believe that smoking ganja at parties is alright - an indication perhaps of the fear of sanctions amongst individuals who do not believe the substance to be intrinsically harmful.

Younger and older users' feeling about drugs (Tables 47 and 48)

On one set of beliefs and attitudes young drug users hold a very similar set of beliefs and attitudes about drugs to those held by their non-using contemporaries, whilst older users hold views which are more favourable to drugs than those of older non users.

TABLE 45

ATTITUDES TO USE OF DRUGS AMONG YOUNG PEOPLE

	Upper Secondary		Total No. of Respondents
	Drug Users	Non-Drug Users	
Worry a lot about it	105 (58.3)	1515(88.5)	1620
Worry a little about it	31 (17.2)	135( 7.9)	166
Don't worry to much	24 (13.3)	32( 1.9)	56
Don't worry at all	20 (11.1)	26( 1.5)	46
No information	-	3( 0.2)	3
Total	180	1711	1891

TABLE 46

## FEELINGS AND BELIEFS ABOUT DRUGS: I

	Lower Secondary						Upper Secondary			
	Drug Users			Non-Drug Users			Drug Users		Non-Drug Users	
	A	D	No information	A	D	No information	A	D	A	D
Sleeping pills - O.K.	76 (25.0)	227 (74.7)	1 (0.3)	295 (12.0)	2140 (87.3)	16 (0.7)	52 (28.9)	121 (71.1)	164 (9.6)	1546 (90.4)
Smoking ganja at parties is alright	28 (9.2)	273 (89.8)	3 (1.0)	55 (2.2)	2383 (97.2)	13 (0.5)	50 (27.8)	130 (72.2)	59 (3.4)	1651 (96.5)
Drinking brandy causes harm	144 (47.4)	158 (52.0)	2 (0.7)	1654 (67.5)	779 (31.8)	18 (0.7)	134 (74.4)	4 (25.5)	1440 (84.2)	270 (15.8)
Regular ganja causes harm	160 (52.6)	141 (46.4)	3 (1.0)	1666 (68.0)	765 (31.2)	20 (0.8)	138 (76.7)	42 (23.3)	1478 (86.4)	232 (13.6)

A - Agree

D - Disagree

TABLE 47

## FEELINGS AND BELIEFS ABOUT DRUGS: II (LOWER SECONDARY)

	Lower Secondary											
	Drug Users						Non-Drug Users					
	1	2	3	4	5	No information	1	2	3	4	5	No information
Take one take others	42 (13.8)	31 (10.2)	70 (23.0)	75 (24.7)	81 (26.6)	5 (1.6)	255 (10.4)	338 (13.8)	587 (23.9)	801 (26.4)	850 (34.7)	20 (0.8)
Drugs - good	24 (7.9)	42 (13.8)	66 (21.7)	89 (29.3)	77 (25.3)	6 (2.0)	93 (3.8)	226 (9.2)	617 (25.2)	532 (2.7)	965 (39.4)	18 (0.7)
Drugs - lead to illness	52 (17.1)	80 (25.3)	74 (24.3)	54 (17.8)	40 (13.2)	4 (1.3)	458 (18.7)	687 (28.0)	596 (24.3)	52 (1.7)	419 (17.1)	29 (1.2)
Drugs - not all drug users hooked	19 (6.3)	30 (9.9)	118 (38.8)	62 (20.4)	61 (20.1)	14 (4.6)	59 (2.4)	203 (8.3)	1018 (41.5)	507 (2.7)	604 (24.6)	60 (2.4)
Drugs - harmful	63 (20.7)	69 (22.7)	63 (20.7)	45 (14.3)	57 (18.8)	7 (2.3)	436 (17.8)	555 (22.6)	574 (23.4)	564 (1.9)	483 (19.7)	39 (1.6)
Drugs - harmless	15 (4.9)	35 (11.5)	127 (41.8)	55 (18.1)	56 (18.4)	16 (5.3)	68 (2.8)	238 (9.7)	1071 (43.7)	64 (1.9)	549 (22.4)	61 (2.5)
Drugs - make people confused	43 (14.1)	65 (21.4)	81 (26.6)	48 (15.8)	51 (16.8)	16 (5.3)	292 (11.9)	643 (26.2)	821 (33.5)	377 (1.3)	359 (14.6)	59 (2.4)
Drugs - do things better	10 (3.3)	20 (6.6)	63 (20.7)	102 (33.6)	100 (32.9)	9 (3.0)	41 (1.7)	56 (2.3)	379 (15.5)	707 (23.8)	1225 (50.0)	43 (1.8)
Can't stop	50 (16.4)	54 (17.8)	73 (24.0)	60 (19.7)	61 (20.1)	6 (2.0)	421 (17.2)	532 (21.7)	632 (25.8)	121 (1.1)	521 (21.3)	24 (1.0)
Relax	22 (7.2)	22 (7.2)	77 (25.3)	94 (30.9)	79 (26.0)	10 (3.3)	42 (1.7)	121 (4.9)	577 (23.5)	390 (1.2)	994 (40.6)	27 (1.1)
Drug takers have many friends	28 (9.2)	24 (7.9)	97 (31.9)	72 (23.7)	75 (24.7)	8 (2.6)	57 (2.3)	119 (4.9)	826 (33.7)	158 (2.8)	861 (35.1)	30 (1.2)

Key:

1 - Agree strongly

2 - Agree

3 - Not sure

4 - Disagree

5 - Disagree strongly

Key:  
1 - Agree Strongly  
2 - Agree  
3 - Not sure  
4 - Disagree  
5 - Disagree Strongly

TABLE 48

FEELINGS AND BELIEFS ABOUT DRUGS: II (UPPER SECONDARY)

	Upper Secondary											
	Drug Users						Non-Drug Users					
	1	2	3	4	5	No infor mation	1	2	3	4	5	No infor mation
Take one take others	50 (27.8)	62 (34.4)	50 (27.8)	6 (3.3)	11 (6.1)	1 (0.6)	463 (27.1)	568 (33.2)	419 (24.5)	64 (3.7)	193 (11.3)	4 (0.2)
Drugs - good	29 (16.1)	64 (35.6)	49 (27.2)	19 (10.6)	18 (10.0)	1 (0.6)	132 (7.7)	250 (14.6)	545 (31.9)	218 (12.7)	561 (32.8)	5 (0.3)
Drugs - lead to illness	71 (39.4)	66 (36.7)	28 (15.6)	6 (3.3)	7 (3.9)	2 (1.1)	857 (50.1)	608 (35.5)	112 (6.5)	25 (1.5)	103 (6.0)	6 (0.4)
Drugs - not all drug users hooked	17 (9.4)	45 (25.0)	59 (32.8)	38 (21.1)	19 (10.6)	2 (1.1)	54 (3.2)	165 (9.6)	611 (35.7)	427 (25.0)	446 (26.1)	8 (0.5)
Drugs - harmful	63 (35.0)	66 (36.7)	26 (14.4)	14 (7.8)	10 (5.6)	1 (0.6)	548 (32.0)	490 (28.6)	274 (16.0)	217 (12.7)	176 (10.3)	6 (0.4)
Drugs - harmless	14 (7.8)	56 (31.1)	57 (31.7)	32 (17.8)	20 (11.1)	1 (0.6)	51 (3.0)	299 (17.5)	634 (37.1)	328 (19.2)	392 (22.9)	7 (0.4)
Drugs - make people confused	25 (13.9)	69 (38.3)	68 (37.8)	10 (5.6)	5 (2.8)	3 (1.7)	340 (19.9)	630 (36.8)	578 (33.8)	60 (3.5)	92 (5.4)	11 (0.6)
Drugs - do things better	11 (6.1)	12 (6.7)	42 (23.3)	59 (32.8)	55 (30.6)	1 (0.6)	30 (1.8)	35 (2.0)	261 (15.3)	470 (27.5)	910 (53.2)	5 (0.3)
Can't stop	22 (12.2)	27 (15.0)	56 (31.1)	44 (24.4)	29 (16.1)	2 (1.1)	376 (22.0)	422 (24.7)	535 (31.3)	217 (12.7)	152 (8.9)	9 (0.5)
Relax	16 (8.9)	38 (21.1)	46 (25.6)	44 (24.4)	34 (18.9)	2 (1.1)	40 (2.3)	98 (5.7)	393 (23.0)	415 (24.3)	759 (44.4)	6 (0.4)
Drug takers have many friends	29 (16.1)	44 (24.4)	52 (28.9)	25 (13.9)	29 (16.1)	1 (0.6)	62 (3.6)	136 (7.9)	488 (28.5)	353 (20.6)	667 (39.0)	5 (0.3)

Thus, younger individuals in general feel that taking one drug does not necessarily lead to taking others; are fairly evenly split as to whether drugs lead to illness, or are only harmful if taken regularly, or make people confused; and are very uncertain as to whether there are some drugs which are harmless, or whether all drug users became hooked. Drug users and non users alike feel that drugs do not help one to do things better; and are split as to whether, if one starts taking drugs one cannot stop. However, non users are more decided in rejecting the view that drugs can help one relax; and that drug users have many friends.

Among the older age group, it is not only these latter two statements which strongly separate user from non user; there are also significant differences between the groups on many other items. Drug users are much more likely to believe that drugs can make one feel good, that not all users became hooked; that some drugs are harmless and to reject the idea that if one starts taking drugs, it is impossible then to stop.

The image of the drug user (Table 49(a) and (b))

The image of the drug user is seen as more attractive and positive by drug users than non drug users, as earlier studies with young cigarette smokers and alcohol drinkers have shown with respect to their (legal) drug. When one asks drug users for their image of "the typical drug user", the majority have a clear image that they can express; whereas non users, especially if young, are more likely to admit that they have no such clear image. Having said this, the image held by both groups is strikingly similar; and it is clear that drug users do not idealize "the typical drug user". Thus, the majority of those who do have an image see the drug user as often bored, not getting on well with his parents, unreliable, wanting to escape his problem, lonely, needing to be free, not shy, wanting to leave school, feeling bullied, and not particularly popular with the opposite sex. Older individuals - whether users or non users - are much more decided on each of these facets of the image than are younger individuals.

TABLE 49(a)

## THE IMAGE OF DRUG USERS (LOWER &amp; UPPER SECONDARY)

	Lower Secondary						
	Drug Users				Non-Drug Users		
	True	False	Don't Know	No information	True	False	Don't Know
Is a lonely person	134 (44.1)	48 (15.8)	117 (38.5)	5 (1.6)	1007 (41.1)	195 (8.0)	1218 (49.7)
Get well with parents	66 (21.7)	132 (43.4)	99 (32.6)	7 (2.3)	265 (10.8)	1253 (51.1)	898 (36.6)
Must be free	132 (43.4)	72 (23.7)	95 (31.3)	5 (1.6)	1173 (47.9)	268 (10.9)	985 (40.2)
Popular with opposite sex	70 (23.0)	90 (29.6)	134 (44.1)	10 (3.3)	313 (12.8)	609 (24.8)	1500 (61.2)
Often bored	152 (50.0)	43 (14.1)	105 (34.5)	4 (1.3)	1344 (54.8)	135 (5.5)	952 (38.8)
Feels bullied	104 (34.2)	64 (21.1)	124 (40.8)	12 (3.9)	530 (21.6)	342 (14.0)	1542 (62.9)
Can be relied on	36 (11.8)	144 (47.4)	109 (35.9)	15 (4.9)	105 (4.3)	1293 (52.8)	1017 (41.5)
Is shy	36 (11.8)	133 (43.8)	199 (39.1)	16 (5.3)	133 (5.4)	1064 (43.4)	1205 (49.2)
Is grown up	83 (27.3)	82 (27.0)	125 (41.1)	14 (4.6)	359 (14.6)	646 (26.4)	1380 (56.3)
Wants to leave school	127 (41.8)	66 (21.7)	98 (32.2)	13 (4.3)	813 (33.2)	352 (14.4)	1237 (50.5)
Escape problems	150 (49.3)	43 (14.1)	104 (34.2)	7 (2.3)	1223 (49.9)	147 (6.0)	1051 (42.9)
Total	1090	917	1229	108	7265	6304	12985
							407

TABLE 49(b)

## THE IMAGE OF DRUG USERS (UPPER SECONDARY)

	Upper Secondary						
	Drug Users				Non-Drug Users		
	True	False	Don't Know	No information	True	False	Don't Know
Is a lonely person	113 (62.8)	19 (10.6)	47 (26.1)	1 (0.6)	867 (50.7)	155 (9.1)	686 (40.1)
Get well with parents	6 (3.3)	113 (73.9)	39 (21.7)	2 (1.1)	63 (3.7)	1292 (75.5)	350 (20.5)
Must be free	91 (50.6)	42 (23.3)	46 (25.6)	1 (0.6)	731 (42.7)	383 (22.4)	589 (34.4)
Popular with opposite sex	32 (17.8)	84 (46.7)	63 (35.0)	1 (0.6)	252 (14.7)	668 (39.0)	780 (45.6)
Often bored	140 (77.8)	14 (7.8)	25 (13.9)	1 (0.6)	1289 (75.3)	90 (5.3)	328 (19.2)
Feels bullied	96 (53.3)	31 (17.2)	52 (28.9)	1 (0.6)	744 (43.5)	212 (12.4)	743 (43.4)
Can relied on	14 (7.8)	119 (66.1)	46 (25.6)	1 (0.6)	70 (4.1)	1206 (70.5)	429 (25.1)
Is shy	17 (9.4)	100 (55.6)	62 (34.4)	1 (0.6)	79 (4.6)	994 (58.1)	632 (36.9)
Is grown up	44 (24.4)	75 (41.7)	58 (32.2)	3 (1.7)	215 (12.6)	645 (37.7)	840 (49.1)
Wants to leave school	67 (37.2)	49 (27.2)	64 (35.6)	-	622 (36.4)	309 (18.1)	778 (45.5)
Escape problems	131 (72.8)	17 (9.4)	32 (17.8)	-	1179 (68.9)	98 (5.7)	428 (25.0)
Total	751	683	534	12	6111	6052	6583
							75



Compare the above image of "the typical drug user" with the self descriptions that the drug users gave of themselves (Tables 49 - 56). Some of the aspects - being bored, not getting with parents and so on - are common to both the self image and the "typical" image for a number of the drug users. But on other aspects, drug users differentiate sharply between self description and public image. The fact that users of drugs have a very similar image of the "typical drug user" to that unflattering portrait held by the non users tells us about the effectiveness of the public discussion of drug use, in which a very negative view is promulgated. It may also indicate that the young drug user may well be able to tolerate both this image and his own habit by differentiating himself from the "typical" user - a perhaps dangerous position to arrive at, in that he may then assume a certain degree of personal invulnerability when public discussion turns to the harm that drugs can do to the individual.

#### The Projective Question

The projective question "If you were a parent": allowed individuals to distance themselves from any personal habit, and view drug taking among adolescents somewhat more objectively: how would they feel in the parental role? The question sought the views of respondents on the use by children of a range of drugs, including cigarettes and alcohol, as well as some of the illegal ones.

For every drug, and amongst every group without exception, it was a minority - and often a very small minority - who would approve of the child's use, or would feel indifferent to it. Even with respect to cigarette use, only 21.4% of the most tolerant group, the young drug users, would give such a response (compared with 5.5% of their non-user contemporaries).

However, with respect to whether they would actively try to stop the child, or merely disapprove, young drug users and non users differ significantly. The young drug users are more likely to take no action than to take action, while the young non users are more evenly divided between the two possibilities. Among the older individuals, no such user/non user differences obtain; and disapproval rather than action is the more likely response.

#### The law as a sanction

96.8% of non-users, and as many as 83.9% of drug users, believe that ganja should be unlawful for everyone. (Nearly all the remainder of drug users opine that its use should be limited to those over 21). The law, for all individuals, would seem to be a much respected force in the land, who might at first sight be seen as benefiting from such a change.

However, the law on drugs is perhaps perceived differently by user and non user: the law seems only to be acting as a discouragement to present users of drugs, for 93% of non users stated that they would not try ganja even if its use were legal. Contrast this with the 37.8% of older users who would either try ganja (if not already experienced) or use it more frequently if it were legalized and the 17.5% of younger users who would also do so. The discrepancy between old and young users in large part reflects the general lack of interest in ganja as a drug of choice among the young: whereas amongst the older drug users, ganja was the most frequently ("ever") experienced, it ranked last among the Lower Secondary School drug users.

#### Sources of information about drugs (Table 50)

Drug users are markedly less dependent upon the media of television, radio and the newspapers for their information about drugs than are non users. (59.5% of younger users name the media as their principal source, as against 74.3% for younger non users; and 42.2% of older users as against 70.3% of the older non users). Users, and especially the older users, are likely to state that their main source of information had been a friend (35.5% of the older users; and 13.5% of the younger users), with "own experience" being the main source for 10% of the older and 9.2% of the younger users. Family members, school programmes, religious leaders and other sources were seldom cited as sources by members of any group.

#### The effect of the information received (Table 51)

The effect of the information received has been largely to increase the fear of drugs in the non user (56.8%), or to decrease interest in drugs (8.5%) or at least to leave the individual unaffected.

TABLE 50  
SOURCE OF INFORMATION ABOUT DRUGS

Sources	Lower Secondary		Upper Secondary		Lower Respondents	Upper Respondents
	Drug Users	Non-Drug Users	Drug Users	Non-Drug Users		
Brother/sister	15 ( 4.9)	78 ( 3.2)	2 ( 1.1)	147 ( 2.7)	93	49
Parents	16 ( 5.3)	132 ( 5.4)	5 ( 2.8)	75 ( 4.4)	148	80
Friend (girl)	11 ( 3.6)	17 ( 0.7)	12 ( 6.7)	28 ( 1.6)	28	40
Friend (boy)	30 ( 9.9)	73 ( 3.0)	52 (28.9)	132 ( 7.7)	103	184
Own experience	28 ( 9.2)	129 ( 5.3)	18 (10.0)	37 ( 2.2)	157	55
T.V., radio news	181 (59.5)	1822 (74.3)	76 (42.2)	1202 (70.3)	2003	1278
School programme	5 ( 1.6)	31 ( 1.3)	4 ( 2.2)	43 ( 2.5)	36	47
Religious or other organisation	10 ( 3.3)	96 ( 3.8)	4 ( 2.2)	82 ( 4.8)	106	86
Others	8 ( 2.6)	64 ( 2.6)	7 ( 3.9)	58 ( 3.4)	72	65
No information	-	9 ( 0.4)	-	7 ( 0.4)	9	7
Total	304 (100.0)	2451 (100.0)	180 (100.0)	1711 (100.0)	2755	1891

TABLE 51

WHAT HAS BEEN THE EFFECT OF INFORMATION RECEIVED?

UPPER SECONDARY

	Upper Secondary			Total No. of Respondents
	Drug Users	Non-Drug Users	Non-Drug Users	
More interested in trying drugs	21(11.7)	28( 1.6)	49	
Less interested in trying drugs	47(26.1)	146( 8.5)	193	
Afraid of trying drugs	70(38.9)	972(56.8)	1042	
Has not affected me	26(14.4)	216( 2.6)	242	
Have not received any information	16( 8.9)	343(20.0)	359	
No information	-	6	6	
Total	180(100.0)	1711(100.0)	1891	

Only 1.6% of non users claim that they have received information which has increased their interest in trying drugs; but 11.7% users state that it has had such an effect. Fear has been instilled in 38.9% of users, with a further 40.5% left less interested or unaffected. Thus, the media's strong anti-drug campaign has had a marked effect upon the majority of non users and many users, although one might be suspicious that some individuals might feel that having perceived the purpose of the campaign, they ought to report themselves affected by it. For a minority of drug users, the campaign has clearly been counterproductive.

#### The kind of information

The kind of information most of interest to individuals was something which discriminates between drug users and non users only in so far as the numbers who professed no interest was concerned: 43.1% of non-users but only 22.8% of users, professed themselves to be lacking in interest. Given the remainder, in both group information about the psychological effects of drugs were three to four times more often mentioned than information about their physical effects; with information about the law on drugs, and about counselling services being of lesser importance to all. (Legal information is, however, somewhat more often mentioned, not surprisingly, by users than by non users).

#### The schools's response to the drug user

How did the child perceive his school's likely response to an individual found using drugs? Taken overall, the most likely single action by the school was seen to be to send the individual to a school counsellor, or, less likely, to the hospital (taken together, these were mentioned by 38% of the sample); 14% believed that parents would be informed, and only 6% believe that nothing would happen. Punitive action was envisaged by the 16% who thought that the police would be called in, and the 15% who thought that the pupil would be expelled.

Only in their greater belief that nothing would happen (perhaps personal experience is involved here) did drug users differ at all from non users; and this also reflects drug users' greater inclination to feel that nothing should happen. (The two questions had been posed - what would and what should the school do?) However, the majority of individuals feel that parents should be notified (31%) or that the pupil should be referred to counsellors (20%) or to hospital (11% of the drug users - although 20.7% of non users would favour this course of action).

#### Sources of help (Table 52)

Sources of help if one had a drug problem were somewhat differently perceived by drug users and non users. Doctors and parents would be the hypothetical choice of 73.2% of non users, but for only 55.5% of drug users. For non users, there are seen to be few other major sources of help if one had such a problem (School Counsellors would be turned to by only 6.7% of the sample, and religious teachers were mentioned by only 5.3%). Drug users, as indicated, are somewhat less reliant upon doctors or parents for help, and, for a minority of them, ex-drug users (11.7%) or friends (8.9%) would be a more likely source of help than counsellors or religious teachers. Very few individuals indeed would feel that they had no one to advise or help them (only 2.6% of non users, and 6.7% of users expressed this feeling).

To the question whether or not there was a counsellor in their school, 79.4% of non users, but only 55.6% of users believed that there was such a figure - the latter group perhaps having had more reason to discover any lack of such a figure. But, as answers to the previous question have indicated for neither group was a counsellor seen as an important source of help for drug matters.

#### Availability of drugs (53, 54 and 55)

Availability of drugs asked about the local availability of the range of illegal drugs, non users were markedly less knowledgeable than were drug users in their age group. Thus, whereas 90% of all younger non users had no idea of the local availability of ganja, or of opium or heroin, only 61% of younger drug users had no idea (note, too, that these drugs do not rank high on their list of those experienced). Amongst the older non users, there was slightly more knowledge - but the proportion of those having no idea was 85%, as against the older users' 45-60% (depending upon type of drug). It is interesting to note that, amongst the younger age group, regardless of whether one was a user or not, the drugs most commonly known about were the stimulants.

Thus, very few non drug users know anything of local market availability of the illegal substances that many of their contemporaries know to be readily available - and use. Perceptions of ease of access do differ somewhat between older and younger users, whereas the older users rank the drugs in terms of ease of availability thus:

TABLE 52

SOURCE OF HELP IF ONE HAD A DRUG PROBLEM

	Upper Secondary		Total No. of Respondents
	Drug Users	Non-Drug Users	
Parents	38(21.1)	491(28.7)	529
Brother or sister	7( 3.9)	25( 1.5)	32
Friends	16( 8.9)	63( 3.7)	79
Doctor/Psychiatrist	62(34.4)	761(44.5)	823
Priest/religious teacher	7( 3.9)	91( 5.3)	98
School Counsellor	9( 5.0)	115( 6.7)	124
Teacher	8( 4.4)	39( 2.3)	47
Ex-drug users	21(11.7)	77( 4.5)	98
No one	12( 6.7)	45( 2.6)	57
No information	-	4( 0.2)	4
Total	180(100.0)	1711(100.0)	1891

TABLE 53

AVAILABILITY OF DRUG TYPES BY DRUG USERS IN LOWER AND UPPER SECONDARY

Drug Type	Lower Secondary					Upper Secondary				
	Very Easy	Quite Easy	Not Easy	Don't Know	No information	Very Easy	Quite Easy	Not Easy	Don't Know	
Ganja	36 (11.8)	26 ( 8.6)	50 (16.4)	188 (61.8)	4 ( 1.3)	39 (21.7)	39 (21.7)	21 (11.7)	81 (45.0)	
Stimulants	57 (18.8)	65 (21.4)	47 (15.5)	131 (43.1)	4 ( 1.3)	21 (11.7)	39 (21.7)	28 (15.6)	92 (51.1)	
Heroin/ Morphine	19 ( 6.3)	24 ( 7.9)	64 (21.1)	192 (63.2)	5 ( 1.6)	14 ( 7.8)	24 (13.3)	33 (18.3)	109 (60.6)	
Opium	25 ( 8.2)	30 ( 9.9)	54 (17.8)	190 (62.5)	5 ( 1.6)	12 ( 6.7)	30 (16.7)	27 (15.0)	111 (61.7)	
Total	137	145	215	701	18	86	132	109	393	

TABLE 54  
AVAILABILITY OF DRUG TYPES BY NON-DRUG USERS IN LOWER AND UPPER SECONDARY

Drug Type	Lower Secondary					Upper Secondary				
	Very Easy	Quite Easy	Not Easy	Don't Know	No Information	Very Easy	Quite Easy	Not Easy	Don't Know	
Ganja	41 ( 1.7)	54 ( 2.2)	135 ( 5.5)	2209 (90.1)	12 (0.5)	60 ( 3.5)	95 ( 5.6)	95 ( 5.6)	1461 (85.4)	
Stimulants	83 ( 3.4)	197 ( 8.0)	160 ( 6.5)	1999 (81.6)	12 (0.5)	56 ( 3.3)	140 ( 8.2)	104 ( 6.1)	1411 (82.5)	
Heroin/ Morphine	28 ( 1.1)	34 ( 1.4)	131 ( 5.3)	2248 (91.7)	10 ( 0.4)	37 ( 2.2)	47 ( 2.7)	132 ( 7.7)	1495 (87.8)	
Opium	34 ( 1.4)	44 ( 1.8)	133 ( 5.4)	2228 (90.9)	12 ( 0.5)	39 ( 2.3)	55 ( 3.2)	120 ( 7.0)	1497 (87.5)	
Total	186	329	559	8684	46	192	337	351	5864	

TABLE 55

PERCEIVED EASE OF AVAILABILITY OF DRUG SUBSTANCES IN LOCALITY:  
PERCENTAGE BELIEVING THE SUBSTANCE TO BE VERY

OR  
QUITE EASILY OBTAINED

Drug Type	Lower Secondary		Upper Secondary	
	Drug Users	Non- Drug Users	Drug Users	Non- Drug Users
Ganja	20.4	3.9	43.4	9.1
Stimulants	40.2	11.4	33.4	11.5
Heroin/Morphine	14.2	2.5	21.1	4.9
Opium	18.1	3.2	23.4	5.5

TABLE 56

MAIN REASONS FOR DRUGS USES

	Lower Secondary		Upper Secondary	
	Drug Users	Non- Drug Users	Drug Users	Non- Drug Users
Didn't use it	226 (74.3)	2367 (96.6)	70 (38.9)	1621 (94.7)
Curiosity	28 ( 9.2)	29 ( 1.2)	60 (33.3)	57 ( 3.3)
Friends use it	16 ( 5.3)	11 ( 0.4)	10 ( 5.6)	1 ( 0.1)
To be relaxed	2 ( 0.7)	7 ( 0.3)	3 ( 1.7)	3 ( 0.2)
To forget problems	19 ( 6.3)	20 ( 0.8)	26 (14.4)	27 ( 1.6)
To understand self	3 ( 1.0)	2 ( 0.1)	-	-
To help study	1 ( 0.3)	1 -	3 ( 1.7)	-
Be independent	2 ( 0.7)	5 ( 0.2)	1 ( 0.6)	-
Be different	2 ( 0.7)	1 -	-	-
To enjoy self	4 ( 1.3)	3 ( 0.1)	7 ( 3.9)	2 ( 0.1)
No information	1 ( 0.3)	5 ( 0.2)	-	-
Total	304	2451	180	1711

ganja > stimulants > heroin = morphine = opium  
younger users perceive the situation to be as follow:

Stimulants > ganja > heroin = morphine = opium  
Age differences in the relative interest in ganja and stimulants would explain such a difference in perceptions of availability.

Main reasons for using drugs (Table 56)

Curiosity, the forgetting of problems and the example of friends are, for both young and old users alike, the main reasons given for using drugs; with few individuals mentioning any other of the suggested reasons - relaxation, self understanding, to help one study, or to be independent or different. Many drug users indicate their experimental status by, on this question, maintaining that they do not any longer use drugs.

Number of friends using particular drugs (Table 57(a) and (b))

Drug users, on average, know many more people who are using drugs than do non users. For each drug named, between 90% and 95% of younger non users, and 78-93% of older non users know no one who was using the drug, whereas 55-70% of younger users and 34-72% of older users answered similarly. Amongst the younger drug users, it was most likely that the individual would know some amphetamine users (although only 7.9% claimed that they knew many); with approximately similar numbers knowing some users of ganja, opium, heroin, and L.S.D. Older and younger users are not markedly differentiated by their pattern of drug user acquaintances: thus 16.1% of older, and 14.5% of younger users claim to know many ganja users (although ganja use itself markedly differentiates older from younger) and fewer than 9% know many users of any drug.

There emerges, therefore, a pattern of loose small networks of individuals who use similar illegal drugs, known to each other, but largely unrealized by their immediate non-using contemporaries. These user groups are one of the main ways individuals are initiated into and maintained in the drug habit.

TABLE 57(a)

NUMBER OF FRIENDS USING PARTICULAR DRUGS

Drug Type	Lower Secondary										
	Drug Users					Non-Drug Users					
	Many	Same	Few	None	No information	Many	Some	Few	None	No information	
Ganja	44 (14.5)	23 ( 7.6)	31 (10.2)	203 (66.8)	3 ( 1.0)	57 ( 2.3)	40 ( 1.6)	129 ( 5.3)	2214 (90.3)	11 ( 0.4)	
Amphetamines	24 ( 7.9)	43 (14.1)	59 (19.4)	168 (55.3)	10 ( 3.3)	45 ( 1.8)	48 ( 2.0)	159 ( 6.5)	2175 (88.7)	25 ( 1.0)	
Opium	25 ( 8.2)	24 ( 7.9)	26 ( 8.6)	213 (70.1)	16 ( 5.3)	23 ( 0.9)	25 ( 1.0)	70 ( 2.9)	2307 (94.1)	26 ( 1.1)	
LSD	30 ( 9.9)	25 ( 8.2)	37 (12.2)	201 (66.1)	11 ( 3.6)	37 ( 1.5)	30 ( 1.2)	66 ( 2.7)	2286 (93.3)	32 ( 1.3)	
Heroin/Morphine	24 ( 7.9)	27 ( 8.9)	29 ( 9.5)	213 (70.1)	11 ( 3.6)	27 ( 1.1)	32 ( 1.3)	58 ( 2.4)	2313 (94.4)	21 ( 0.8)	
Total	147	142	182	998	51	189	175	482	11295	114	

CHAPTER THREE

NUMBER OF FRIENDS USING PARTICULAR DRUGS

Drug Type	Upper Secondary											
	Drug Users						Non-Drug Users					
	Many	Some	Few	None	No information		Many	Some	Few	None	No information	
Ganja	29 (16.1)	26 (14.4)	63 (35.0)	62 (34.4)	-		21 (1.2)	49 (2.9)	302 (17.7)	1339 (78.3)	-	
Amphetamines	12 (6.7)	18 (10.0)	54 (30.0)	96 (53.3)	-		15 (0.9)	53 (3.1)	252 (14.7)	1389 (81.2)	2 (0.1)	
Opium	10 (5.6)	14 (7.8)	31 (17.2)	123 (68.3)	2 (1.1)		15 (0.9)	30 (1.8)	151 (8.8)	1510 (88.3)	5 (0.3)	
LSD	4 (2.2)	10 (5.6)	33 (18.3)	130 (72.2)	3 (1.7)		8 (0.5)	8 (0.5)	90 (5.3)	1595 (93.2)	10 (0.6)	
Heroin/Morphine	15 (8.3)	17 (9.4)	40 (22.2)	107 (59.4)	1 (0.6)		13 (0.8)	23 (1.3)	156 (9.1)	1516 (88.6)	3 (0.2)	
Total	70	85	221	518	6		72	163	951	7349	20	

The present chapter serves to summarize the findings of the Kelantan survey reported in detail in Chapter Two and its accompanying tables; and compares these East-Coast data with the West Coast data reported in the earlier monograph (only where there are striking differences between Penang and Selangor will these states be referred to separately, otherwise, they will be taken together as "the West Coast", although clearly they are no more totally representative of all West Coast states than is Kelantan of East Coast States). References to tables where appropriate will be made at the end of a paragraph, and will be to tables in the Kelantan monograph (by numeral only) and in the Penang and Selangor monograph (letter prefix plus numeral). Thus (1/PDU1) indicates Table 1 (Kelantan), and Table PDU1 (in the section on Patterns of Drug Abuse the Penang and Selangor monograph). Hence this chapter must be read in conjunction with the earlier Penang and Selangor School's Report).

Incidence Rates and Patterns of Drug Abuse

In Kelantan, one in ten of the Secondary School children surveyed claimed to have had some level of drug experience (which might be, as in the majority of cases, brief experimentation with one or two illicit drugs, or might be the more regular use of a wider range of drugs), the rate being slightly lower in the top three forms of secondary education than in the bottom three forms. There are differences of only a few percent at most between these rates and those found in Penang, and are almost identical to the level of incidence found in Selangor (1, PDU1). In both East Coast and West Coast, there is a marked peak-trough-peak effect when relating proportion of drug users to age; such that first and second forms have a higher-than-average percentage of drug using pupils; third and fourth forms a lower than average percentage; and fifth and sixth forms have a higher-than-average percentage of users. (2.SOC 1). This effect, demonstrated in the large number of schools in the three states, can be treated with same confidence. Age, too, is a highly relevant factor to bear in mind when discussing the representation of girls among the drug users. In Kelantan, drug use is almost as likely to occur amongst girls as boys in the Lower School sample, but boys are over represented among the older drug users. At both ages, however, the sexes are somewhat closer to equal representation than they were in the West Coast Survey. (3 Soc 2).

Cigarette and alcohol use by the users of other drugs is significantly higher in all three states, with the older users being considerably more likely to have smoked than the young users. (Alcohol is not a major drug of choice among any group). The West Coast user is slightly more likely to have used these legal drugs than is his East Coast contemporary. (4-8; PDU 32-41).

Patterns of drug use (9-25; PDU 14-37)

The most strikingly repeated finding in East and West Coast surveys is the Upper School - Lower School difference in drugs of choice. Thus, in terms of drugs ever experienced, the rank order of drugs runs as follows:-

LOWER SCHOOL:	KELANTAN	S A T H M G
	PENANG	S T A H M G
	SELANGOR	S T A H M G
UPPER SCHOOL:	KELANTAN	G T A S H M
	PENANG	G S T A H M
	SELANGOR	G S H A T M

(\* Sedative, Amphetamines, Tranquillizers, Heroin, Morphine, Ganja)

In the above table, exact position is less important than relative, because the differences between rates may be only a few percentage points. However, the consistency with which Ganja is the predominant drug of choice among the Upper sample and the least preferred among the lower sample; the overall popularity of synthetic over the opiates; and the low position of morphine: all these findings indicate a country-wide difference between young and older drug users which cannot be explained in terms of market availability, but should perhaps be seen in terms of fashion and of the greater importance to the young of concealing their habit. If ganja and some of the opiates are taken by smoking, either in a special or conventional cigarette, then the fact that under 15's in general are not smokers of ordinary cigarettes would seem to militate against this mode of administration being used to take drugs. Synthetic pills are easier to conceal and to use in public places for the younger drug user.

Chapter Two contains analyses of patterns of drug use taking each drug substance in turn, and, in Kelantan as in the West Coast, it is found that respondents tend to somewhat over-estimate their frequency of use unless this is tied down to a specific period. Thus, most confidence can be placed in the self reports of the frequency of use during the two months preceding the survey; and these data broadly (but not exactly) bear out the patterns shown in the analysis of data on the drugs "ever used". Ganja remains the most frequently experienced drug of the older sample, with the various synthetic drugs being the choice of most of the younger users; and the opiates - especially morphine being comparatively rarely used.

Perhaps the most worrying finding for the future pattern of drug taking in the country is the number of non drug users who, although elsewhere in the questionnaire their worries about drug use, nonetheless are interested in trying stimulants, tranquillizers or (especially) sedatives or barbiturates. Nearly one in five of the older non users in Kelantan expressed interest in trying the latter drugs; and clearly, they tend to regard synthetic drugs as less potentially harmful than the opiates, whilst linking ganja with the opiates in terms of harmfulness.

The peak age for initiation to drugs is the same in Kelantan as in the West Coast; in all, the years 14, 15 and 16 witness not only the start of most drug users' habit, they also see the start of smoking among those who come to use cigarettes, and alcohol amongst those who start to drink (33, PDU 34-36). The association between cigarette smoking and the use of other drugs is thus not only correlational but temporal in the Kelantan, as in the West Coast findings and indicates perhaps the age at which the majority of older drug users had wished to mark their arrival into the adult world. However, it must be stressed that in all three states, drug use does not proceed beyond an experimental stage for the majority of those here termed "drug users", and this is borne out in all three states when respondents were asked to compare their drug use at the time of the survey with its level twelve months previously; more individuals claim to have reduced their drug use (or stopped altogether) than claim to have increased their usage.



#### Differences between drug users and non drug users

Kelantan and the West Coast States differ from each other in many respects, in the ethnic balance, cultural traditions and present economic concentrations. The two areas, too, lie on separate trade routes as far as drug trafficking is concerned; and the combination of all these factors provide the prima-facil case for expecting differences not only in the patterns of drug abuse but also in the nature of those taking them in the two areas.

And, just as the previous section has been able to report quite strong similarities, rather than differences, in the patterns of abuse, so the present section shows that the East Coast sample very largely confirms the picture of the drug user as against his non using contemporaries that was drawn from the West Coast sample.

Thus, in both regions, drug abuse is found throughout all sub-sections of the community; and is not especially the problem of any one social group or religious-ethnic group (36-39; Soc 3-6). Nor is it particularly confined to the boys in the sample; or to children with low educational aspirations or poor parental ambition for them (41-42; Soc 3-5). In short, in Kelantan, just as in Penang and Selangor, youthful experimentation with drugs, sometimes leading on to regular use and eventual dependency, is not assimilable to the conventional categories of social problem: it is not tied to social deprivation, nor are the characteristics of the "at risk" population definable in terms of social background.

Later paragraphs in this section will indicate what kinds of characteristic do loosely define the "at risk" segment of the youthful population; but first it is necessary to amplify some of the broad generalizations made above. The association between social class and drug abuse amongst youth during the 1960's, and these (largely American) studies showed drug abuse-along with alcoholism and other conditions - as reactions to or consequences of social deprivation. Such studies, as the West Coast and now the Kelantan surveys show, provide an inappropriate model for describing and explaining contemporary youthful drug abuse.

It is true that children of unskilled workers and of unemployed parents comprise forty three percent of the drug user sample; but this in no way indicates anything significant, in that children of these two social groups comprise forty two percent of the total sample. Thus, what is found for these social groups (and all other occupational groups) is no disproportionate representation among the drug using sample: approximately one in ten of the children of all social groups, whether socially deprived or privileged, East Coast Coast or West, have had some experience of illicit drugs. Family size, too, is not a factor which differentiates drug user from non drug user in either region of the country: only children, children from average and from large families have equal chances of being included in the drug user sample. (38; Soc 5)

The West Coast survey showed some small inter-ethnic differences in the rates of drug abuse, but it was able to show that most of this difference related to a ethnicity friendship groups in particular localities being notably higher or lower than average incidence of drug users: i.e. if a function of case of transmission within a face-to-face group, rather than anything specific to ethnicity or religious group itself. Kelantan, with a predominantly Malay population (nine out of ten of the total sample being Muslim), shows again that ethnicity is an unreliable predictor of drug user status: although Buddhists are under represented among the older sample. There is no such under representation in the younger sample. Thus, in both surveys, it would be true to say that no community is, in general, either over or under represented amongst the drug users, relative to their numbers in the total community, although in any particular location there may well be local concentrations within a particular ethnic or religious group (39; Soc 6)

Chapter Two has itemised all of these attitudinal and value differences and the present chapter can briefly summarize them thus. Although many "drug users" hold similar views to the non users of their age, there is a greater chance that a drug user will have lower ambitions and expectations of success in school (even if parental hopes for him are still high); and many express some discontentment about his freedom in school, as well as perceiving his performance there to be only average; and may indeed have a considerably higher-than-average absence rate. Many drug users report

that they are in general unhappy - a response uncharacteristic of non users-; and again, the two groups are differentiated by their recent states of health - many of the drug users reporting various minor ailments symptoms. The literature gives one the expectation that drug users may see themselves in a way which is uncharacteristic of non users of the same age; and this hypothesis is given partial confirmation in all three states. There are many similarities between the groups' self descriptions; but the drug user group are more likely to describe themselves as innovative of new styles, and willing to do new things (two characteristics which may well be conducive to experimentation with drugs). Drug users are also more likely than non users to stress the importance of their friendship group to them; to see themselves as grown up; and able to do what they want. But the characteristic self descriptions of drug users are not wholly positive and outgoing: there is a significant minority of the users who report themselves as being bored much of the time; feeling bullied by others- lacking chances in life; lonely, and not getting on well with parents; and generally not enjoying life. Such self descriptions are very rarely given by the non users (and indeed are not characteristic of the majority of experimental drug users). Differences on self concept thus do not provide a hard-and-fast demarcation between user and non user; but what differences there are, may suggest some of the social and personal factors which may lead some school children to abuse drugs. For at least a minority of the youthful drug abusers, it seems that the individual is a rather unhappy independence seeker, to whom the circle of friends is most important.

The older drug users, especially, indicate their greater-than-average independence of parents and reliance on friends on many items in the questionnaire; and we gain a picture of them as being more self determining (for example, of the time they would come home at night), and less confiding in their parents (for example, if they were ever in serious trouble) (58-62; SD 9-14).

Drug users in all three states express, as one would expect, more positive attitudes towards drugs than do non users: but this does not extend to their being universally in favour of the use of drugs. Indeed, most individuals report themselves concerned about drug abuse amongst youth, and tend to uphold the current legal

position with regard to illegal drugs. There is, however a substantial group amongst the drug users who go against the majority, condemnation of drug substances themselves, and who tend to minimize the possible harm that they can cause. (Permissive attitudes mingle with some misperceptions about the actual effects of the drugs). Drug users and especially the older individuals - are much more likely to talk of the emphatic or relaxant properties of drugs, and to play down the dangers of addiction, implying that they at least are unlikely to lose control over their habit (67-71; ATT1-7)

But does this carry over into a glamorized self image of the drug user as part of a drug sub-culture? In fact, the differences are very small (67 ATT 3): both groups hold a rather negative view of him - and it is a view which in many respects coincides with the negative aspects of the users' own self images. There is no evidence for the hypothesis that some glamour about drug use has attracted individuals towards the habit: rather, we should see it as one behaviour amongst many which individuals who have need of extra social support from their peers use to signal their independence and adulthood. The drug user is more in touch with others who are drug using, obtains more information from such contacts ( and thus is less dependent upon the media for his knowledge about drugs), and as a consequence, is less likely to be affected by the media's anti-drug campaigns, or might indeed become more interested in trying drugs as a result. Drug users are also much more likely to realize the current market availability of illegal drugs in their own locality than are non users; and this must be seen as a further factor which facilitates their drug habit in addition to the reasons that they give most frequently; sheer curiosity, the example of friend, and the desire to escape problem.

(81-85; RU 1-5).

There were, thus, some few contrasts between the findings of the Kelantan survey and those of the two earlier surveys on the West Coast; but the overall conclusion must be that the similarities between surveys are much more striking. In all three states the level of incidence of drug abuse; the patterns of drug abuse, and particularly the variation between younger and older school children in drugs of preference; and the characteristics of the drug user as compared with his non drug using contemporary in school are all remarkably consistent; and allow us to relate our conclusions about youthful drug abuse based upon the West Coast survey to the East Coast as well (and by implication to the whole of the country). The final chapter will thus summarize and extend these conclusions.

#### CHAPTER FOUR

Surveys of a representative sample of the secondary school population of three states have, as the last chapters have indicated, shown a very consistent picture of the level and nature of drug abuse amongst this population. The three states - Penang, Selangor and Kelantan - have contrasting traditions and present day economic and social concerns; and yet in all three has the problem of youthful drug abuse been shown to have much the same characteristics. Its level is sufficient to cause concern; but must not be exaggerated to the point that unrealistic conclusions are drawn, and inappropriate solutions are proposed. That ten percent of the secondary school population have experience of drug substances, some of which may be addictive and all of which are illegal, is cause for concern; but that the majority of these individuals cease the use of drugs after brief experimentation is reason for responding to the problem with caution. Over reaction on the part of society might well have the effect of maintaining such experimenters on their drugs, and increasing the already apparent interest in illegal drugs admitted to by a significant minority of individual who have never experienced any illegal drug. (Indeed, a realistic way was expressed to members of the survey team by a number of headmasters in Kelantan, who feared that the very conducting of the survey might itself strengthen curiosity about drugs amongst their pupils).

#### Implications for policy

The Kelantan Secondary Schools survey has found a very similar level of drug abuse amongst the adolescents in this state to the level found, in the surveys conducted a year previously, in the two West Coast states of Penang and Selangor; and the indication is that in all areas there is serious problem of drug abuse without this problem being of epidemic proportions. There are no earlier surveys in Kelantan with which to compare the present level of abuse, and thus one can only presume, rather than prove, that there is in this state, just as there is on the West Coast, a trend towards the wider use of all drug substances, matching a greater availability of these substances. In Kelantan; as in the West Coast, there appears to be considerable lack of knowledge about drugs and their effects on the part of the

children (and, one must presume from public pronouncements, from many of the older generation). Much public discussion reflects attitudes towards drug taking, which although understandable, are likely to be unhelpful to those who are 'at-risk'; we have seen how much this group is almost ready to develop conflicts with any authority figures in their search for independent status. Schools and parents are uncertain about how to react if one of their children turns out to be using drugs.

Thus, there is more widespread experimentation with drugs, with a proportion of the experimenters going on to regular use, and the majority either ceasing their use or remaining occasional users. Evidence from the Central Narcotics Bureau Customs and the Police on the level of drug trafficking into the country in all states indicates that illegal commercial interest will continue to work on the curiosity of youth to initiate as many of the risk group, and to maintain those who begin experimenting. For curiosity is, with the influence of close friends, one of the main motivators toward experimentation with illegal drugs; and in the survey, many individuals who had never experienced any drug, and who indeed expressed many strong anti-drug sentiments, nonetheless could admit to some interest in trying a number of drug substances. It may well be that the true figure of those non users who would be interested in trying drugs is considerably higher than the survey showed, as admitting this curiosity is clearly in conflict with the socially-acceptable point of view that all the adolescents are clearly aware of. Such curiosity, if we are to believe the individuals' own introspections, are held in check by fears about the immediate damage that drugs can do to health, as well as by concern for the social and legal consequences of drug use; and society must provide the curious teenager with reasoned and informed arguments to reinforce this initial emotional response of fear. Providing him instead with unsubstantiated propaganda, some of which he can check against the experiences of contemporaries who are drug users, may have an opposite effect, for he may find his peers dismissing propaganda as being typical of adult authority. Drug education has to walk a tightrope it must be sufficiently factual and straightforward for credibility, yet be sufficiently off putting that it does not serve to increase curiosity among those who had had little contact with any information about drugs previously.

The responses of society to drug abuse in its midst are determined by the way its individual members perceive the problems associated with such abuse. These perceptions and subsequent responses are influenced by prevailing attitudes and beliefs. The problem of drug abuse has recently become one of the most publicized topics; and a climate of opinion has been created which has turned the drug issue into one of national survival along with the major political issues of the day. Drug abuse is seen as a threat to society as well as to the individual user. In such a climate of opinion, it is understandable if members of the public develop attitudes towards drugs and their use which are unequivocally condemnatory, and which view drug taking as if its worst possible consequences were inevitable in each case. We must, therefore, advocate caution in order to be effective. The problem is serious, but using the broadest possible definition of a drug user - any individual who has had some experience of the non-medical use of drugs - it was found that between ten and twelve percent of the Secondary School population can be so classified, with about three percent of the sample being regular and widely experienced drug users. Only a minority of this latter group - approximately one percent of the total sample - are likely to have reached the stage of physical dependence upon drugs ("addiction"); and would show withdrawal signs on cessation of drug use. This group would require both detoxification and a thorough rehabilitation programme.

Public concern about the drug problem has the very healthy result that more resources are now being devoted to providing facilities for the treatment of addiction; and that more individuals in positions of responsibility are becoming aware of the symptomology involved. But, although it is entirely understandable, it is potentially dangerous if public concern fails to distinguish between the addicted individual, and the regular user whose intake is much less; and between both of these and those individuals whose curiosity has either been satisfied after one or two occasions, or is still latent.

It must be appreciated that the majority of drug users are not from problem backgrounds, or suffering any particular personal inadequacies; but rather that the motivation which leads most individuals to use drugs today may be precisely the same

motivation which has always led adolescents to choose some behaviour to mark out their identity and to claim their independent status. An inappropriately designed drug education campaign may actually foster drug abuse by presenting such youth with models of behaviour, by indicating that such behaviour is both widespread among youth, and also that it is disapproved of by adult society.

Prevention of drug abuse must therefore attempt to present an undramatic, non-glamourizing, factual picture about the nature and consequences of drug use. Since the target group for this campaign are the social and experimental drug users (rather than the addicted minority of users), and since it has been shown that both of these have rather mixed feelings about drugs but have some acquaintance with their properties, it is important that anti-drug campaigns be in a position to reinforce the target group's doubts, whilst mapping on to their knowledge. To take an example of the latter point: current public discussion of drugs makes little differentiation between hard and soft drugs in their effects; and yet many drug users are aware that there are important differences between particular drugs in their bodily effects, in the degree to which they can become addictive, the dosage which can be lethal, and so on. Some current anti-drug campaigns indeed attempt to blur distinctions in the hope of driving individuals away from all drug substances. This "scare" approach may well be effective in reinforcing the fears of the conservative majority, but will lead to the crediting of the campaign in the eyes of the more experienced minority.

Thus, drug education and information programmes should be realistic in their approach, concentrating perhaps more on the personal needs of and pressures upon the average adolescent than they do on the biochemical and pharmacological properties of particular drugs. (Emphasis largely or solely on the latter has the effect, many American health education evaluators have shown, of turning the programme into something of a "consumer's guide" to drugs). Such an approach does not imply the relaxation of all social constraints, but, rather, an intelligent application of them. Where the drug abuser is becoming a menace to those around him, then clearly action must be taken to protect society, as well as to help the individual. A heavy handed criminalizing

of all drug-related problems, however, is likely to reduce the chances of rehabilitation.

To conclude, it seems entirely appropriate to repeat for the Kelantan study what was said at the end of the Penang and Selangor study monograph: The unrestrained use of drugs in society may indeed pose a threat to the fabric of society. We have not however reached a stage where one could say that drug use had already spread out of hand. It is clear that the treatment facilities available are inadequate: and that the most damaging way society - parents, teachers, policy makers and others - could respond would be to see the issue simply as one of many social menaces, without realizing the basically unremarkable and entirely normal human motivations which have led part of the present adolescent generation to use drugs in expressing their various subgroups; treat the curious and experimenting adolescent as reasonable individuals who can be educated; treat the regular dependent users in a way which will be most helpful to them rather than alienating them by the process of stigmatization; be honest in using the processes of influence one has; and above all realize that the manace to society lies in the manufacturers traffickers and pushers of drugs, high placed and local, rather than in their commercial victims; then perhaps the problem may become manageable.

## APPENDIX

### A Statistical Comparison of drug-using subsamples on East and West Coast

The main analyses presented in the earlier chapters of this report have compared the East Coast drug-using subsample with their non-drug-using contemporaries; and have described how far drug-users differ from non-drug-users in terms of their:-

- 1) Social background; educational aspirations; family relationships;
- 2) Attitudes toward drug use; knowledge about drugs; general attitudes.

It was found that, in many respects, drug users and non-users were very similar in background and outlook, but there were some factors which were more characteristic of users than non-users. Were these the same predictive factors that had been found in the earlier West Coast study? This was the second major question discussed in the report; and it was concluded that many of the user/non-user differences were common to both areas. Thus it was concluded that many of the pressures upon young people to take up the drug habit were similar in the different areas of the country.

As yet, the Drug Dependence Research Project has not yet undertaken the comparative analysis of data on the East and West Coast sample populations as a whole (i.e. comparing East with West Coast adolescents in general, regardless of user or non-user status.) Thus, the final analyses to be presented in this appendix lack their essential background data, and must therefore be treated with caution; they are descriptive and not in any way explanatory data.

These analyses contrast East and West Coast drug users with each other, on all measures used in the studies; and the present appendix presents those few indicators on which there were significant differences (using the chi-square statistic) together with examples of the remaining analyses indicating similarities between East and West Coast.

Such analyses, it is hoped will be of value to those, for example, who need to tailor drug education or rehabilitation programmes to the two regions; and who therefore wish a general picture of the two drug using populations. It would, however, be misleading to take these analyses, is isolation, as indicators of basic differences in, for example, motivation towards drugs between East and West Coasts. As stated above, as yet, we do not possess adequate background data on East and West Coast populations as a whole. Thus, to take an example: supposing it had been found that East Coast drug users, an average, were in height one inch smaller than West Coast users, we would then want to know whether the average height of all the East Coast sample was one inch less than that of all the West Coast sample; or whether the height difference between East and West was only found in the drug user sub-samples.

With this caveat, the appendix now presents a summary of significant differences found between East and West Coast drug users only. (For the first few comparisons, on basic levels of drug experience, this caveat clearly does not apply as the non-drug users are, by definition, excluded from the comparison). The analyses will be tabulated in terms of Chi-square value; degrees of freedom; the level of significance. Conventionally, findings, are described as being of statistical significance if they would occur by chance on less the 5%, or less than 1% of occasions (and would be represented by p values of less than  $p = 0.05$  or  $p = 0.01$  in the tabulations below).

#### Levels of drug experience

Statistical analysis of the frequency of experience of the various drug substances indicates that:-

GANJA : a very similar pattern of experience in East and West Coast drug user sub-samples, with 50% in each area having had some experience, but only between 4% and 6% having had more than 50 experiences of the drug. (Chi-square: 6.58755 with 5 degrees of freedom;  $p = 0.2532$ ; i.e. a non-significant difference between groups, p being substantially greater than the 5% level).

SEDATIVES: again, a fairly similar pattern of use between the areas. Although there are more individuals on the West Coast than the East who had ever used the drug (35% as opposed to 26%) among these users, experimental use predominates.

8.21976	5 d.f.	$p = 0.0507$
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HEROIN: 22% of the West Coast, and 16% of the East Coast claimed some level of experience, although the majority of these had only once or twice experimented with the drugs.

9.01526	5 d.f.	$p = 0.1085$
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MORPHINE: a very similar pattern in both areas, in that 88-89% of either sample had never had any experience of the substance and almost all the rest reported using it only once or twice:

2.80645	5 d.f.	$p = 0.7298$
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Change in pattern of use: present use compared with a year ago showed a very similar pattern of change for all substances in both areas. GANJA, STIMULANTS and HEROIN analyses are given below; and it will be seen that there is no significant difference for any substance. In each case, in each area, the majority of those who had ever experienced a drug reported that they used it less than they had done a year previously (reflecting for each individual the passage of time since a brief experimental period).

GANJA:	3.8611	d.f. 3	$p = 0.2769$
STIMULANTS:	2.3317	d.f. 3	$p = 0.5065$
HEROIN:	1.1409	d.f. 3	$p = 0.7672$

#### Perceived availability of local drugs

GANJA: was seen to be relatively more difficult to obtain on the East Coast; and there was also relatively more expression of ignorance as to the relative ease of availability:

8.1869	d.f. 3	$p = 0.2769$
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STIMULANTS: over 50% in either area say that they do not know about the availability of stimulants. Of the remainder, there are significantly West than East Coast perceiving the drugs as being easy to obtain:

9.2932	d.f. 3	p = 0.0256
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HEROIN: there was greater uncertainty expressed on East than West Coast (61% compared with 55%); with among the remainder, a significantly stronger belief:- the ease of availability on the West than the East Coast.

19.0226	d.f. 3	p = 0.0003
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OPIUM: again, although 61%-67% profess their ignorance of opium supplies, of the majority with some knowledge, significantly more West Coast users than East Coast users perceive the drug as easily available

9.1668	d.f. 3	p = 0.0272
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Alcohol Consumption provides the strongest contrasts of an between the two subsamples, and must be presumed to reflect population-wide differences.

BEER: a very striking contrast emerges between East and West Coast drug users' experience of beer. 80% of the East Coast but only 53% of the West Coast, state that they have never drunk beer. There are a very few individuals at the opposite end of the scale; between 1 & 2% in both states claim to drink beer every day.

48.113	d.f. 6	p = 0.0000
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SPIRITS: again, there is significantly less experience reported on the East than the West Coast; although one must say that both areas, the majority of respondents now never drunk spirits (This is true of 83% of East Coast and 67% of West Coast drug users). There are very few individuals (2% of East and 1% of West Coast samples who are daily spirits drinkers.

26.226	d.f. 6	p = 0.0002
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Reasons given for drug use: varied very little between East and West. Thus, when asked what were their MAIN REASONS, the reasons given varied little between the two areas either in the percentages giving any particular reason, or in the resultant rank order of reasons.

11.389	d.f. 9	p = 0.2500
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Attitudes towards drugs and beliefs about them

THE LAW AS A SANCTION: very strong East and West Coast differences emerged in the comparison of views on what was the desirable legal status of ganja. Whereas 88% of the East Coast drug users believed that the drug should remain illegal for all, only 66% of the West Coast users believed this sample. There were a substantial minority of West Coast individuals who would remove legal sanctions on ganja.

33.10870	d.f. 4	p = 0.0000
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GENERAL ATTITUDE TOWARD YOUTHFUL DRUG TAKING: many individuals in each area expressed concern with the level of drug use amongst young people; but the East Coast drug users expressed a greater degree of concern than the West - 58% of the East as against 47% of West Coast stating that they worry a lot about it.

14.4821	3 d.f.	p = 0.0023
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GANJA: there was only a small trend towards a greater disapproval of smoking ganja at parties in the East Coast (72% as against 66%)

1.84347	1 d.f.	p = 0.1745
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With a stranger difference in the opposite direction on the question of this drugs potential harmfulness. East Coast drug users were less unanimous in believing that if one used ganja regularly it could cause harm.

5.60903	1 d.f.	p = 0.0179
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ADDICTION: asked whether they agreed that not all users got 'hooked', there were more disagreements with the statement on the West than on the East Coast.

18.48813	4 d.f.	p = 0.0010
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DRUG EXPERIENCE: there was a very marked difference between East and West Coast drug users when asked if drugs in general could make one "feel good". The West Coast users were considerably more negative in their views - only 29% of West Coast as opposed to 52% East Coast endorsed their pleasant effect.

35.0905	4 d.f.	p = 0.000
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POPULARITY: there was a nearly-significant trend towards greater belief by West Coast users that those who used drugs would be popular with the opposite sex. (In both areas, it should be noted that one third of the sample said that they had no opinion)

5.63440	2 d.f.	p = 0.0598
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#### General attitudes and aspirations

EDUCATIONAL ASPIRATIONS: East Coast drug users are significantly more likely to retain their ambitions toward University than are those on the West Coast.

15.1777	4 d.f.	p = 0.0043
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TELEVISION WATCHING: was not a major occupation of the majority of the sample in either area, with drug users on the East Coast being even more likely to be either low or never watchers than were those on the West.

13.68537	4 d.f.	p = 0.0084
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GENERAL LEVEL OF HEALTH: only a minority of the sample were likely to report that they were in excellent health; with West Coast drug users being significantly more likely to give this unusual response.

30.674	3 d.f.	p = 0.0000
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On specific health indicators, no significant differences were found; thus, the analysis for reported frequency of NIGHTMARES:

0.33093	2 d.f.	p = 0.8475
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It is also notable that the East Coast sample included significantly fewer individuals who rated themselves as either very or quite happy:

9.91074	3 d.f.	p = 0.0193
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GENERAL ATTITUDES AND SELF DESCRIPTIONS: only on some measures were these differences. Although there is a wide range of self reports given when asked if they generally felt "left out of things", there are significantly more East than West Coast respondents who endorse this feeling as applying to themselves:

15.0184	4 d.f.	p = 0.0047
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and there is a trend toward East Coast users feeling bored a lot of the time; although again, both areas contain many individuals who do not endorse this self description:

10.14572	4 d.f.	p = 0.0380
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East Coast users feel more often than West Coast that they always or often are in a position to do what they want:

15.13752	3 d.f.	p = 0.0017
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There was also a significant difference between areas in responses to the self description: "I feel bad if I leave something unfinished which I had promised": this result was caused by the greater use of both extreme categories by East Coast respondents.

12.0407	3 d.f.	p = 0.0072
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Drug users on the East Coast admit to considerably greater fears about undertaking novel things:

42.7895	4 d.f.	p = 0.0000
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But both groups are very similar in the importance they attach to making a lot of money one day:

3.39889	2 d.f.	p = 0.1828
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On this last item, plus the remaining self descriptions and general attitudes, analysis gave no significant differences.

Relatives with parents and friends, similarly, showed that in both East and West Coasts, there were similar stresses laid upon the greater importance are attached to close relations with ones parents as opposed to ones friends. Thus, parental disapproval is rated as more upsetting than that from ones friends in both East and West Coasts:

3.7372	2 d.f.	p = 0.1543
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